Form 5500	Annual Return/Report of Employee Benefit Plan		OMB Nos. 12 12	10-0110 10-0089
Department of the Treasury Internal Revenue Service	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).	and		
Department of Labor Employee Benefits Security Administration	Complete all entries in accordance with the instructions to the Form 5500.		2012	
Pension Benefit Guaranty Corporation		This	Form is Open to Pu Inspection	ıblic
Part I Annual Report Ider	tification Information			
For calendar plan year 2012 or fiscal	plan year beginning 01/01/2012 and ending 12/31/2	2012		
A This return/report is for:	a multiemployer plan; a multiple-employer plan; or			
	X a single-employer plan; A DFE (specify)			
B This return/report is:	the first return/report; the final return/report;			
·	an amended return/report; a short plan year return/report (less the	han 12 mo	onths).	
			. П	
	ed plan, check here	_	' L	
D Check box if filing under:	Form 5558; automatic extension;	the	e DFVC program;	
	special extension (enter description)			
Part II Basic Plan Inform	nation—enter all requested information			
1a Name of plan STORY WORLDWIDE, LLC 401K PL		1b	Three-digit plan number (PN) ▶	001
		1c	Effective date of pla 12/29/1999	an
2a Plan sponsor's name and addres	s; include room or suite number (employer, if for a single-employer plan)	2b	Employer Identifica Number (EIN) 20-2658265	tion
		2c	Sponsor's telephor number 206-336-3007	
87 WALL STREET SEATTLE, WA 98121	87 WALL STREET SEATTLE, WA 98121	2d	Business code (see instructions) 511190	9

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	Filed with authorized/valid electronic signature.	10/14/2013	HEATHER DWYER	
HERE	Signature of plan administrator	Date	Enter name of individu	al signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2013	HEATHER DWYER	
HERE	Signature of employer/plan sponsor	Date	Enter name of individu	al signing as employer or plan sponsor
SIGN HERE				
	Signature of DFE	Date	Enter name of individu	al signing as DFE
Preparer	's name (including firm name, if applicable) and address; include i	room or suite numbe	r. (optional)	Preparer's telephone number (optional)
For Pap	erwork Reduction Act Notice and OMB Control Numbers, see	the instructions for	r Form 5500	Form 5500 (2012)

	Form 5500 (2012) Page 2		
	Plan administrator's name and address Same as Plan Sponsor Name Same as Plan Sponsor Address		dministrator's EIN 0-2658265
87	ORY WORLDWIDE, LLC. WALL STREET EATTLE, WA 98121		dministrator's telephone umber 206-336-3007
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:	4b ⊨	IN
а	Sponsor's name	4c ₽	'n
5	Total number of participants at the beginning of the plan year	5	132
6	Number of participants as of the end of the plan year (welfare plans complete only lines 6a, 6b, 6c, and 6d).		
а	Active participants	6a	83
b	Retired or separated participants receiving benefits	6b	0
С	Other retired or separated participants entitled to future benefits	6c	45
d	Subtotal. Add lines 6a, 6b, and 6c	6d	128
е	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	0
f	Total. Add lines 6d and 6e	6f	128
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g	99
	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.	6h	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
8a	If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Code	es in th	e 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 Characteristics Codes in the instructions:

9a	Plan fu	arrangement (check all that apply)	9b	Plan bene	efit a	arrangement (check all that apply)	
	(1)		Insurance		(1)		Insurance
	(2)		Code section 412(e)(3) insurance contracts		(2)		Code section 412(e)(3) insurance contracts
	(3)	X	Trust		(3)	X	Trust
	(4)		General assets of the sponsor		(4)		General assets of the sponsor
10	Check a	all ap	plicable boxes in 10a and 10b to indicate which schedules are at	ttache	d, and, wł	nere	e indicated, enter the number attached. (See instructions)
a Pension Schedules			b	General	Sch	nedules	
	(1)	×	R (Retirement Plan Information)		(1)	X	H (Financial Information)
	(2)	Π	MB (Multiemployer Defined Benefit Plan and Certain Money		(2)	Π	I (Financial Information – Small Plan)
			Purchase Plan Actuarial Information) - signed by the plan		(3)		A (Insurance Information)
			actuary		(4)	X	C (Service Provider Information)
	(3)	Π	SB (Single-Employer Defined Benefit Plan Actuarial		(5)	X	D (DFE/Participating Plan Information)
			Information) - signed by the plan actuary		(6)		G (Financial Transaction Schedules)

SCHEDULE C	Service Provider	Information	c	OMB No. 1210-0110
(Form 5500)				2042
Department of the Treasury Internal Revenue Service	This schedule is required to be filed uno Retirement Income Security		2012 This Form is Open to Public Inspection.	
Department of Labor Employee Benefits Security Administration	File as an attachmen	nt to Form 5500.		
Pension Benefit Guaranty Corporation For calendar plan year 2012 or fiscal p	plan year beginning 01/01/2012	and ending 12/31	/2012	hispotieni
A Name of plan		B Three-digit		
STORY WORLDWIDE, LLC 401K PL	AN	plan number (PN)	•	001
Plan sponsor's name as shown on	line 20 of Form FEOD	D Employer Identification	on Number (
STORY WORLDWIDE, LLC.		D Employer Identification) isamun n	EIN)
Part I Service Provider Int	formation (see instructions)			
or more in total compensation (i.e., plan during the plan year. If a pers	cordance with the instructions, to report the info money or anything else of monetary value) in on received only eligible indirect compensatio	connection with services rendered to n for which the plan received the requ	the plan or t	the person's position with the
Information on Persons R	o include that person when completing the ren eceiving Only Eligible Indirect Con ether you are excluding a person from the rem	npensation	ved only elic	jible
 Information on Persons R Check "Yes" or "No" to indicate whe indirect compensation for which the If you answered line 1a "Yes," entries 		npensation ainder of this Part because they recein structions for definitions and condition on providing the required disclosures f	ns)	XYes No
 Information on Persons R Check "Yes" or "No" to indicate whe indirect compensation for which the If you answered line 1a "Yes," entreceived only eligible indirect components 	eceiving Only Eligible Indirect Con ether you are excluding a person from the rem. e plan received the required disclosures (see in er the name and EIN or address of each person	npensation ainder of this Part because they recein astructions for definitions and condition on providing the required disclosures f and (see instructions).	ns)	X Yes No
 Information on Persons R Check "Yes" or "No" to indicate whe indirect compensation for which the If you answered line 1a "Yes," entreceived only eligible indirect composition (b) Enter r 	eceiving Only Eligible Indirect Com ether you are excluding a person from the rem e plan received the required disclosures (see in er the name and EIN or address of each perso ensation. Complete as many entries as neede	npensation ainder of this Part because they recein astructions for definitions and condition on providing the required disclosures f and (see instructions).	ns)	X Yes No
Check "Yes" or "No" to indicate whe indirect compensation for which the If you answered line 1a "Yes," entr received only eligible indirect comp (b) Enter r FID.INV.INST.OPS.CO.	eceiving Only Eligible Indirect Com ether you are excluding a person from the rem e plan received the required disclosures (see in er the name and EIN or address of each perso ensation. Complete as many entries as neede	npensation ainder of this Part because they recein astructions for definitions and condition on providing the required disclosures f and (see instructions).	ns)	X Yes No
Information on Persons R Check "Yes" or "No" to indicate whe indirect compensation for which the If you answered line 1a "Yes," ent received only eligible indirect compo (b) Enter r FID.INV.INST.OPS.CO.	eceiving Only Eligible Indirect Com ether you are excluding a person from the rem e plan received the required disclosures (see in er the name and EIN or address of each perso ensation. Complete as many entries as neede	npensation ainder of this Part because they receinstructions for definitions and condition on providing the required disclosures f ed (see instructions). ded you disclosures on eligible indirect	ns)	X Yes No
I Information on Persons R Check "Yes" or "No" to indicate whe indirect compensation for which the If you answered line 1a "Yes," entr received only eligible indirect compo- (b) Enter r FID.INV.INST.OPS.CO. D4-2647786	eceiving Only Eligible Indirect Com ether you are excluding a person from the rem e plan received the required disclosures (see in er the name and EIN or address of each perso ensation. Complete as many entries as needed name and EIN or address of person who provid	npensation ainder of this Part because they receinstructions for definitions and condition on providing the required disclosures f ed (see instructions). ded you disclosures on eligible indirect	ns)	X Yes No
 Information on Persons R Check "Yes" or "No" to indicate whe indirect compensation for which the If you answered line 1a "Yes," entreceived only eligible indirect composite (b) Enter r (b) Enter r FID.INV.INST.OPS.CO. 	eceiving Only Eligible Indirect Com ether you are excluding a person from the rem e plan received the required disclosures (see in er the name and EIN or address of each perso ensation. Complete as many entries as needed name and EIN or address of person who provid	npensation ainder of this Part because they receinstructions for definitions and condition on providing the required disclosures f ed (see instructions). ded you disclosures on eligible indirect	ns)	X Yes No
Information on Persons R Check "Yes" or "No" to indicate whe indirect compensation for which the If you answered line 1a "Yes," ent received only eligible indirect compo (b) Enter r FID.INV.INST.OPS.CO.	eceiving Only Eligible Indirect Com ether you are excluding a person from the rem e plan received the required disclosures (see in er the name and EIN or address of each perso ensation. Complete as many entries as needed name and EIN or address of person who provid	npensation ainder of this Part because they receinstructions for definitions and condition on providing the required disclosures f ed (see instructions). ded you disclosures on eligible indirect	ns)	X Yes No
Check "Yes" or "No" to indicate whe indirect compensation for which the If you answered line 1a "Yes," ent received only eligible indirect comp (b) Enter r FID.INV.INST.OPS.CO.	eceiving Only Eligible Indirect Com ether you are excluding a person from the rem e plan received the required disclosures (see in er the name and EIN or address of each perso ensation. Complete as many entries as needed name and EIN or address of person who provid	npensation ainder of this Part because they receinstructions for definitions and condition on providing the required disclosures f ed (see instructions). ded you disclosures on eligible indirect ded you disclosure on eligible indirect	ns)	Yes No Yes No ion
Information on Persons R Check "Yes" or "No" to indicate whe indirect compensation for which the If you answered line 1a "Yes," ent received only eligible indirect comp (b) Enter r FID.INV.INST.OPS.CO. (b) Enter r	eceiving Only Eligible Indirect Com ether you are excluding a person from the rem. e plan received the required disclosures (see in er the name and EIN or address of each person ensation. Complete as many entries as needed name and EIN or address of person who provided	npensation ainder of this Part because they receinstructions for definitions and condition on providing the required disclosures f ed (see instructions). ded you disclosures on eligible indirect ded you disclosure on eligible indirect	ns)	Yes No Yes No ion
Information on Persons R Check "Yes" or "No" to indicate whe indirect compensation for which the Jo If you answered line 1a "Yes," entr received only eligible indirect compo- (b) Enter r FID.INV.INST.OPS.CO. (b) Enter r	eceiving Only Eligible Indirect Com ether you are excluding a person from the rem. e plan received the required disclosures (see in er the name and EIN or address of each person ensation. Complete as many entries as needed name and EIN or address of person who provided	npensation ainder of this Part because they receinstructions for definitions and condition on providing the required disclosures f ed (see instructions). ded you disclosures on eligible indirect ded you disclosure on eligible indirect	ns)	Yes No Yes No ion
Information on Persons R Check "Yes" or "No" to indicate whe indirect compensation for which the If you answered line 1a "Yes," entreceived only eligible indirect compensation (b) Enter r FID.INV.INST.OPS.CO. (b) Enter r (b) Enter r (b) Enter r	eceiving Only Eligible Indirect Com ether you are excluding a person from the rem. e plan received the required disclosures (see in er the name and EIN or address of each person ensation. Complete as many entries as needed name and EIN or address of person who provided	npensation ainder of this Part because they receinstructions for definitions and condition on providing the required disclosures field (see instructions). ded you disclosures on eligible indirect ded you disclosure on eligible indirect	ns)	Yes No xe providers who

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b)	(c)	(d)	(e)	(f)	(g)	(h)
Service Code(s)	Relationship to employer, employee	by the plan. If none,	Did service provider receive indirect	Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	Did the service provider give you a formula instead of an amount or estimated amount?
64 37 65 60	RECORDKEEPER	200	Yes 🕺 No 🗌	Yes 🕺 No 🗌	0	Yes 🗙 No 🗌
		(a) Enter name and EIN or	address (see instructions)		

(b)	(c)	(d)	(e)	(f)	(g)	(h)
Service Code(s)	Relationship to employer, employee	Enter direct	Did service provider receive indirect	Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	Enter total indirect	Did the service provider give you a formula instead of an amount or
			Yes 🗌 No 🗌	Yes 🗌 No 🗌		Yes 🗌 No 🗍
		(a) Enter name and EIN or	address (see instructions)		

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0		(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	
			Yes 🗌 No 🗌	Yes 🗌 No 🗌		Yes 🗌 No 🗍

Page 3 -	2
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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(C) Enter amount of indirect compensation	
FIDELITY INVESTMENTS INSTITUTIONAL	60	0	
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any the service provider's eligibility ne indirect compensation.	
ABF LG CAP VAL INV - STATE STREET B 225 FRANKLIN STREET BOSTON, MA 02111	0.40%		
(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 of	compensation, including any	
	formula used to determine the service provider's eligibili for or the amount of the indirect compensation.		

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Ρ	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 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	(b) Nature of Service	(C) Describe the information that the service provider failed or refused to				
	instructions)	Code(s)	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				

Pa	rt III	Termination Information on Accountants and Enrolled Actuaries (see in (complete as many entries as needed)	structions)
а	Name		b EIN:
С	Positic	n:	
d Addre		SS:	e Telephone:
Ex	planatio):	

а	Name:	b EIN:
С	Position:	
d	Address:	e Telephone:

Explanation:

Explanation:

а	Name:	b EIN:
С	Position:	
d	Address:	e Telephone:

Explanation:

а	Name:	b EIN:
С	Position:	
d	Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500)	DFE/Participating Plan Information			OMB No. 1210-0110			
Department of the Treasury Internal Revenue Service		required to be filed under section 104 of the ement Income Security Act of 1974 (ERISA)	2012				
Department of Labor Employee Benefits Security Administration		File as an attachment to Form 5500.		This Form is Open to Public Inspection.			
For calendar plan year 2012 or fiscal p	blan year beginning	01/01/2012 and	d ending 12/3	31/2012			
A Name of plan STORY WORLDWIDE, LLC 401K PLA	Ν		B Three-digit plan numb	er (PN) • 001			
C Plan or DFE sponsor's name as she STORY WORLDWIDE, LLC.	own on line 2a of Form	5500	D Employer Id 20-2658265	Identification Number (EIN) 265			
	entries as needed	Ts, PSAs, and 103-12 IEs (to be co to report all interests in DFEs)	mpleted by pla	ans and DFEs)			
b Name of sponsor of entity listed in		NAGEMENT TRUST COMPANY					
C EIN-PN 04-3022712-024	d Entity C code	e Dollar value of interest in MTIA, CCT, F 103-12 IE at end of year (see instruction		76724			
a Name of MTIA, CCT, PSA, or 103-	12 IE:						
b Name of sponsor of entity listed in	(a):						
C EIN-PN	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	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, F 103-12 IE at end of year (see instruction					
a Name of MTIA, CCT, PSA, or 103-	12 IE:						
b Name of sponsor of entity listed in	()						
C EIN-PN	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	()						
C EIN-PN	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, F 103-12 IE at end of year (see instruction)					

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Schedule D (Form 5500) 2	012	Page 2 - 1				
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	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	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	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	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	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	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)				
a Name of MTIA, CCT, PSA, or 103	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	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)				

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Ρ	Part II	Information on Participating Plans (to be completed by DFEs) (Complete as many entries as needed to report all participating plans)	
а	Plan na	ne	
b	Name o plan spo		C EIN-PN
а	Plan na	ne	
b	Name o plan spo		C EIN-PN
а	Plan na	ne	
b	Name o plan spo		C EIN-PN
а	Plan na	ne	
b	Name o plan spo		C EIN-PN
а	Plan na	ne	
b	Name o plan spo		C EIN-PN
а	Plan na	ne	
b	Name o plan spo		C EIN-PN
а	Plan na	ne	
b	Name o plan spo		C EIN-PN
а	Plan na	ne	
b	Name o plan spo		C EIN-PN
а	Plan na	ne	
b	Name o plan spo		C EIN-PN
а	Plan na	ne	
b	Name o plan spo		C EIN-PN
а	Plan na	ne	
b	Name o plan spo		C EIN-PN
а	Plan na	ne	
b	Name o plan spo		C EIN-PN

SCHEDULE H	Financial Information				OMB No. 1210-0110			
(Form 5500) Department of the Treasury Internal Revenue Service Department of Labor	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).							
Employee Benefits Security Administration Pension Benefit Guaranty Corporation	File as an attachm	ent to Form	5500.			This Form is Open to Public Inspection		
For calendar plan year 2012 or fiscal pl	an year beginning 01/01/2012		and	ending	g 12/31/2	2012		-
A Name of plan STORY WORLDWIDE, LLC 401K PLA	N			В	Three-digi plan numb		•	001
C Plan sponsor's name as shown on listory WORLDWIDE, LLC.	ine 2a of Form 5500				Employer lo 20-2658265		on Number (EIN)
Part I Asset and Liability S	Statement							
the value of the plan's interest in a d lines 1c(9) through 1c(14). Do not e benefit at a future date. Round off a	bilities at the beginning and end of the plan commingled fund containing the assets of menter the value of that portion of an insuranc amounts to the nearest dollar. MTIAs, Co is also do not complete lines 1d and 1e. Sec	nore than one e contract wh CTs, PSAs, a	plan on a hich guarar nd 103-12	line-b ntees,	y-line basis during this	unless th plan year	e value is re , to pay a sp	portable on ecific dollar
As	sets		(a) B	eginn	ing of Year		(b) End	of Year
a Total noninterest-bearing cash		1a						
b Receivables (less allowance for double black)	ubtful accounts):							
(1) Employer contributions		1b(1)				0		6001
(2) Participant contributions		1b(2)				0		14686
(3) Other		1b(3)						
C General investments:								
	money market accounts & certificates	1c(1)	64682				53592	
(2) U.S. Government securities		1c(2)						
(3) Corporate debt instruments (or	ther than employer securities):							
(A) Preferred		1c(3)(A)						
(B) All other		1c(3)(B)						
(4) Corporate stocks (other than e	emplover securities):							
(A) Preferred		1c(4)(A)						
.,		1c(4)(B)						
	ests	1c(5)						
	/er real property)	1c(6)						
	nts)	1c(7)						
	,	1c(8)			73	3919		47911
		1c(9)				3056		76724
	bllective trusts	1c(10)			00	,000		10124
	arate accounts							
. ,	st investment accounts	1c(11)						
	estment entities investment companies (e.g., mutual	1c(12) 1c(13)			3773	3300		4646044
(14) Value of funds held in insurance	ce company general account (unallocated	1c(14)						
(15) Other	(15) Other 1c(15)							
-								

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1d	Employer-related investments:		(a) Beginning of Year	(b) End of Year
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
е	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	3974957	4844958
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
I	Net assets (subtract line 1k from line 1f)	11	3974957	4844958

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	239538	
(B) Participants	2a(1)(B)	487686	
(C) Others (including rollovers)	2a(1)(C)	9326	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	2a(3)		736550
b Earnings on investments:			
(1) Interest:			
 (A) Interest-bearing cash (including money market accounts and certificates of deposit) 	2b(1)(A)	6	
(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)	2668	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		2674
(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)	85191	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)		85191
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(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)		

				(a)	Amount			(b) T	otal
	(6) Net investment gain (loss) from common/collective trusts	2b(6)							1505
	(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)							520955
С	Other income	2c							
d	Total income. Add all income amounts in column (b) and enter total	2d							1346875
	Expenses								
е	Benefit payment and payments to provide benefits:								
	(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)			4	476673			
	(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)							476673
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)				201			
	(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)							201
j	Total expenses. Add all expense amounts in column (b) and enter total	2j							476874
	Net Income and Reconciliation								
k	Net income (loss). Subtract line 2j from line 2d	2k							870001
I	Transfers of assets:								
	(1) To this plan	2l(1)							
	(2) From this plan	2l(2)							
Da	rt III Accountant's Opinion								
3 (Complete lines 3a through 3c if the opinion of an independent qualified public ad attached.	ccountant is a	attache	d to th	is Form 5	5500. Com	plete	line 3d if an	opinion is not
	The attached opinion of an independent qualified public accountant for this plan	is (see instru	uctions)):					
	(1) Unqualified (2) Qualified (3) Disclaimer (4)	Adverse	,						
b I	Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-	8 and/or 103	-12(d)?	,				Yes	No
	Enter the name and EIN of the accountant (or accounting firm) below:		()				L		
	(1) Name: COHNREZNICK LLP		(2) E	EIN: 2	2-147809	9			
d .	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.								
Ра	Part IV Compliance Questions								
4									
	During the plan year:				Yes	No		Amo	unt
а	Was there a failure to transmit to the plan any participant contributions within								
	period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any pr until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correcti	•		4.5	Х				18412
b	Were any loans by the plan or fixed income obligations due the plan in defaul	ι,		4a					
5	close of the plan year or classified during the year as uncollectible? Disregard	d participant l							
	secured by participant's account balance. (Attach Schedule G (Form 5500) P checked.)			4b		Х			

			Yes	No	Αποι	unt
C	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		х		
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		×		
е	Was this plan covered by a fidelity bond?	4e		Х		
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		Х		
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X		
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		Х		
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	Х			
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		×		
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		Х		
I	Has the plan failed to provide any benefit when due under the plan?	41		Х		
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X		
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		Х		
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	s 🗙 No	Amour	nt:	
5b	If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), transferred. (See instructions.)	identi	fy the pla	n(s) to wh	ich assets or liabil	ities were
	5b(1) Name of plan(s)					
				5b(2) EIN	(s)	5b(3) PN(s)

 Part V
 Trust Information (optional)

 6a Name of trust
 6b Trust's EIN

	SCH	HEDULE R	Retirement Pl	an Information				O	/IB No. 1210	-0110	
Department of the reasony Employee R Internal Revenue Service 6 Department of Labor 6 Employee Benefits Security Administration 6			This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section			2012					
				evenue Code (the Code).			This Form is Open to Public Inspection.				
		nefit Guaranty Corporation plan year 2012 or fiscal p	an year beginning 01/01/2012	and e	ending	12/2	31/20 ⁻	12	•		
ΑN	ame of pl					Three-di plan nu (PN)	git		00	1	
		or's name as shown on li DWIDE, LLC.	e 2a of Form 5500		D	Employe			on Number	(EIN)	
Pa	rt I D	Distributions									
All r	eference	s to distributions relate	only to payments of benefits during t	he plan year.							
1			property other than in cash or the forms				1				0
2		e EIN(s) of payor(s) who p vho paid the greatest dolla	aid benefits on behalf of the plan to part r amounts of benefits):	icipants or beneficiaries du	ring the	e year (if	more	than tv	vo, enter El	Ns of	the two
	EIN(s):	04-6568107		<u> </u>							
	Profit-sl	haring plans, ESOPs, ar	d stock bonus plans, skip line 3.			_					
3			eceased) whose benefits were distribute				3				
Pa	art II	Funding Informati ERISA section 302, skip	on (If the plan is not subject to the minin this Part)	mum funding requirements	of sec	tion of 41	2 of th	e Inter	nal Reven	le Coc	le or
4	Is the pla	n administrator making an	election under Code section 412(d)(2) or E	RISA section 302(d)(2)?			۱ <u> </u>	′es	No	J	N/A
	If the pla	an is a defined benefit p	an, go to line 8.								
5			standard for a prior year is being amort er the date of the ruling letter granting th		nth		Day		Yea	ar	
•	-		e lines 3, 9, and 10 of Schedule MB a	-		ler of this	s sch	edule.			
6		•	ntribution for this plan year (include any		-	6	a				
	b Ente	r the amount contributed	by the employer to the plan for this plan	year		6	b				
			from the amount in line 6a. Enter the res f a negative amount)			6	c				
	-	ompleted line 6c, skip li									
7	Will the I	minimum funding amount	reported on line 6c be met by the fundin	g deadline?			Y	'es	No		N/A
8	authority	providing automatic appl	d was made for this plan year pursuant oval for the change or a class ruling lette e?	er, does the plan sponsor o	r plan		<u></u> Г	′es	No	1	N/A
Ра	rt III	Amendments									
9	year that	t increased or decreased	olan, were any amendments adopted du he value of benefits? If yes, check the a	ppropriate Dunar	ease	Πp	ecreas	se	Both		No
Par	t IV	,	ctions). If this is not a plan described un							L	
10	Were un		ties or proceeds from the sale of unalloc	ated securities used to rep	ay anv	exempt l	oan?.		П`	Yes	No
11			ferred stock?	•						Yes	No
	b If th	ne ESOP has an outstand	ng exempt loan with the employer as len n of "back-to-back" loan.)	nder, is such loan part of a	"back-	to-back" l	oan?	<u></u> .	<u> </u>	Yes	No
12	Does the	e ESOP hold any stock th	t is not readily tradable on an establishe	ed securities market?					🗌 `	Yes	No
For	Paperwo	ork Reduction Act Notice	and OMB Control Numbers, see the i	instructions for Form 550	0.			Sche	dule R (Fo	rm 550	JO) 2012

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	_	-

Pa	Part V Additional Information for Multiemployer Defined Benefit Pension Plans									
13	3 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.									
	а	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								
	е	Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise,								
		complete lines 13e(1) and 13e(2).) (1) Contribution rate (in dollars and cents)								
		(2) Base unit measure: Hourly Weekly Unit of production Other (specify):								
	а	Name of contributing employer								
	b	EIN C Dollar amount contributed by employer								
	d									
	е	Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise,								
		 complete lines 13e(1) and 13e(2).) (1) Contribution rate (in dollars and cents) 								
	(1) Contribution rate (in donars and cents) (2) Base unit measure: Hourly Weekly Unit of production Other (specify):									
	а	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 Year								
	е	Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise,								
		complete lines 13e(1) and 13e(2).) (1) Contribution rate (in dollars and cents)								
		(2) Base unit measure: Hourly Weekly Unit of production Other (specify):								
	а	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								
	е	Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise,								
		complete lines 13e(1) and 13e(2).) (1) Contribution rate (in dollars and cents)								
		 (1) Contribution rate (in dollars and cents)								
	-									
	a b	Name of contributing employer EIN C Dollar amount contributed by employer								
	d d									
	u	Date collective bargaining agreement expires (<i>If employer contributes under more than one collective bargaining agreement, check box</i> and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month Day Year								
	е	Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise,								
		complete lines 13e(1) and 13e(2).) (1) Contribution rate (in dollars and cents)								
		(2) Base unit measure: Hourly Weekly Unit of production Other (specify):								
	а	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								
	е	Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise,								
	-	complete lines 13e(1) and 13e(2).)								
		 (1) Contribution rate (in dollars and cents) (2) Base unit measure: Hourly Weekly Unit of production Other (specify):								

	participant for:	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 ma employer contribution during the current plan year to:	ike an							
	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 line 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, c supplemental information to be included as an attachment.								
P	art VI Additional Information for Single-Employer and Multiemployer Defined Benef	it Pens	ion Plans						
18	If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see ir information to be included as an attachment	nstructior	s regarding supplemental						
19	 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 line 19(b)? 								
	Effective duration Macaulay duration Modified duration Other (specify):								

Financial Statements (With Supplementary Information) and Independent Auditor's Report

December 31, 2012

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Schedule of Delinquent Participant Contributions (Schedule H, Line 4a)	16

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CohnReznick LLP cohnreznick.com

Independent Auditor's Report

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

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Story Worldwide, LLC 401(k) Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statement of changes in net assets available for benefits for the year ended December 31, 2012, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the *Basis for Disclaimer of Opinion* paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

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 financial statements. 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 December 31, 2012 and 2011 and for the year ended December 31, 2012, that the information provided to the Plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Other Matters

The supplemental Schedule of Assets (Held at End of Year) (Schedule H, Line 4i) and Schedule of Delinquent Participant Contributions (Schedule H, Line 4a) as of or for the year ended December 31, 2012 are required by the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we do not express an opinion on these supplemental schedules.

Report on Form and Content in Compliance with DOL Rules and Regulations

The form and content of the information included in the 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.

Cohn Regnick LLP

Farmington, Connecticut October 8, 2013

Statements of Net Assets Available for Benefits December 31, 2012 and 2011

	2012		 2011
Assets: Investments, at fair value	\$	4,776,360	\$ 3,901,038
Receivables: Participant contributions Employer contributions Notes receivable from participants		14,686 6,001 47,911	 73,919
Total receivables		68,598	 73,919
Net assets reflecting investments at fair value		4,844,958	3,974,957
Adjustment from fair value to contract value for fully benefit-responsive investment contract		(2,196)	 (1,555)
Net assets available for benefits	\$	4,842,762	\$ 3,973,402

See Notes to Financial Statements.

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Statement of Changes in Net Assets Avaible for Benefits Year Ended December 31, 2012

Additions: Investment income: Net appreciation in fair value of investments Dividends Total investment income	\$	520,955 86,061 607,016
Interest income on notes receivable from participants		2,668
Contributions: Employer Participants Rollovers Total contributions		239,538 487,686 9,326 736,550
Total additions		1,346,234
Deductions: Benefits paid to participants Administrative expenses Total deductions	·	476,673 201 476,874
Net increase		869,360
Net assets available for benefits: Beginning of year		3,973,402
End of year	\$	4,842,762

See Notes to Financial Statements.

Notes to Financial Statements

Note 1 - Description of the Plan:

The following description of the Story Worldwide, LLC 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete 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 safe harbor 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"). The Plan administrator is responsible for oversight of the Plan and determines the appropriateness of the Plan's investment offerings and monitors investment performance.

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 contribute amounts representing distributions from other qualified benefit or defined contribution plans (rollover). 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. Participants direct the investment of their contributions and safe harbor matching contributions into various investment options offered by the Plan. Contributions are subject to certain Internal Revenue Service ("IRS") limitations.

Participant accounts:

Each participant's account is credited with the participant's contribution and Company safe harbor matching contributions, as well as allocations of Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on the participant earnings, account balances, or specific participant transactions, 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 safe harbor matching contributions, plus actual earnings thereon.

Payment of benefits:

On termination of employment, retirement, the attainment of 59-1/2, death or permanent and total disability, a participant may elect to receive either a lump-sum amount, annual installments equal to the value of their account, or a direct rollover distribution. Participants may also take hardship distributions from their accounts. Distributions are subject to the applicable provisions of the Plan agreement.

Notes to Financial Statements

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. A participant may only have one loan outstanding at any time. The loan interest 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 automatic 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 present the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts is prepared using the contract value basis for fully benefit-responsive investment contracts.

Use of estimates:

The preparation of financial statements in accordance 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. The Plan administrator determines the Plan's valuation policies utilizing information provided by the trustee. See Note 5 for discussion of fair value measurements.

Notes to Financial Statements

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

Notes receivable from participants:

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2012 or 2011. If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Payment of benefits:

Benefits are recorded when paid.

Expenses:

Certain expenses of maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation of fair value of investments.

Subsequent events:

The Plan has evaluated subsequent events through October 8, 2013, the date the financial statements were available to be issued.

Note 3 - Certified investments:

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Investments and notes receivable from participants held at December 31, 2012 and 2011, and investment income and interest income on notes receivable from participants for the year ended December 31, 2012, that is disclosed in the accompanying financial statements and supplemental schedules, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by the trustee of the Plan.

Notes to Financial Statements

Note 4 - Investments:

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

	<u>2012</u>	<u>2011</u>
Fidelity Balanced Fund Fidelity Contrafund Fidelity Freedom 2040 Fund	\$ 524,268 545,992 770,563	\$ 424,522 428,829 566,397
Fidelity Freedom 2045 Fund Fidelity International Discovery Fund Fidelity Leveraged Company Stock Fund Fidelity Value Fund	323,318 499,410 302,940 329,723	242,596 360,616 211,144 237,291

During 2012, investments in mutual funds (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by \$520,955.

Note 5 - Fair value measurements:

The framework for measuring fair value 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) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820 are described as follows:

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

Level 2 Inputs to the valuation methodology include:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical 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.

Notes to Financial Statements

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 maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2012 and 2011.

- *Common/collective trust:* Valued at the net asset value ("NAV") of units of a bank collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.
- Mutual funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Notes to Financial Statements

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2012 and 2011:

Assets at Fair Value as of December 31, 2012

		Level 1		Level 2	Level 3			<u>Total</u>	
Mutual funds:									
Large cap	\$	851,014	\$		-	\$	-	\$ 851,014	
Mid cap		847,835			-		-	847,835	
Small cap		40,414			-		-	40,414	
International		504,641			-		-	504,641	
Blended		1,977,933			-		-	1,977,933	
Bond		424,207			-			424,207	
Short-term		<u>53,592</u>						53,592	
Total mutual funds		4,699,636			-		-	4,699,636	
Common/collective trust: Fidelity Managed Income									
Portfolio				76,7	<u>24</u>			76,724	
Total assets at fair value	<u>\$</u>	4,699,636	<u>\$</u>	76,7	<u>24</u>	<u>\$</u>		<u>\$ 4,776,360</u>	

Assets at Fair Value as of December 31, 2011

	Level 1	Level 2	Level 3	<u>Total</u>
Mutual funds:				
Large cap	\$ 636,88	5\$	- \$	- \$ 636,885
Mid cap	618,52	6	-	- 618,526
Small cap	30,00	0	-	- 30,000
International	361,57	3	-	- 361,573
Blended	1,778,84	7	-	- 1,778,847
Bond	347,46	9	-	- 347,469
Short-term	64,68	<u></u>		- 64,682
Total mutual funds	3,837,98	32	-	- 3,837,982
Common/collective trust: Fidelity Managed Income	2			
Portfolio		- 63,0	56	63,056
Total assets at fair value	<u>\$ 3,837,98</u>	<u>32</u> <u>\$ 63,0</u>	56 \$	<u>-</u> <u>\$ 3,901,038</u>

Notes to Financial Statements

Fair value of investments in entities that use NAV:

The following tables summarize investments measured at fair value based on NAV per share as of December 31, 2012 and 2011, respectively.

December 31, 2012	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Common/collective trust - Fidelity Managed Income		oommanonto		3
Portfolio	\$76,724	n/a	Daily	30 days
December 24, 2011	Fair Value	Unfunded	Redemption Frequency (if	Redemption
December 31, 2011 Common/collective trust - Fidelity Managed Income	<u>Fair Value</u>	<u>Commitments</u>	<u>currently eligible)</u>	Notice Period
Portfolio	\$63,056	n/a	Daily	30 days

Note 6 - 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.

Note 7 - Related party transactions and party-in-interest transactions:

Certain Plan assets include investments in funds managed by affiliates of Fidelity Management Trust Company ("FMTC"). FMTC is the Plan's trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for investment management services are included in net appreciation in fair value of the investment as they are paid by revenue sharing rather than a direct payment. As described in Note 2, the Plan made a direct payment to the third party administrator of \$201 which was not covered by revenue sharing. The Plan sponsor pays directly any other fees related to the Plan's operations.

Note 8 - 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. In the event of Plan termination, participants' account balances will be distributed in accordance with the Plan agreement.

Notes to Financial Statements

Note 9 - Tax status:

The Plan utilizes a Fidelity volume submitter Plan document, which obtained its latest opinion letter dated March 31, 2008 in which the IRS stated that the volume submitter Plan, as then designed, was in compliance with applicable requirements of the Internal Revenue Code (the "IRC"). Although, the Plan has been amended and restated since receiving the opinion letter, the Plan administrator believes that the Plan is designed and currently being operated in compliance with the applicable requirements of the IRC and, therefore, believes 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 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 2009.

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, 2012 and 2011 to Form 5500:

	<u>2012</u>	<u>2011</u>
Net assets available for benefits per the financial stateme	\$ 3,973,402	
Adjustment from fair value to contract value for fully benefit-responsive investment contract	2,196	1,555
Net assets available for benefits per Form 5500	<u>\$4,844,958</u>	<u>\$ 3,974,957</u>

The following is a reconciliation of investment income per the financial statements for the year ended December 31, 2012 to Form 5500:

Investment income per the financial statements	\$ 607,016
Prior year adjustment from contract value to fair value for the investment contract Current year adjustment from contract	(1,555)
value to fair value for the investment contract	2,196
Investment income per Form 5500	<u>\$ 607,657</u>

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

Notes to Financial Statements

Note 11 - Non-exempt transactions:

The Company determined that a nonexempt transaction occurred during 2011. This violation 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 8, 2012, for lost earnings in the amount of \$9. The Company believes that the transaction 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 EIN # 20-2658265 Plan # 001

Schedule of Assets (Held at End of Year) (Schedule H, Line 4i) December 31, 2012

<u>(a)</u>	(b) Identity of Issuer	(c) <u>Description</u>	(d) <u>Cost (A)</u>	(e) <u>Current Value</u>
*	American Beacon Large Cap Value Fund Investor Class Fidelity Balanced Fund	Mutual fund Mutual fund		\$
*	Fidelity Capital Appreciation Fund	Mutual fund		26,316
*	Fidelity Contrafund	Mutual fund		545,992
*	Fidelity Freedom 2000 Fund	Mutual fund		48,408
*	Fidelity Freedom 2010 Fund	Mutual fund		357
*	Fidelity Freedom 2020 Fund	Mutual fund		23,972
*	Fidelity Freedom 2025 Fund	Mutual fund		47,686
*	Fidelity Freedom 2030 Fund	Mutual fund		62,390
*	Fidelity Freedom 2035 Fund	Mutual fund		101,628
*	Fidelity Freedom 2040 Fund	Mutual fund		770,563
*	Fidelity Freedom 2045 Fund	Mutual fund		323,318
*	Fidelity Freedom 2050 Fund	Mutual fund		60,090
*	Fidelity Freedom 2055 Fund	Mutual fund		884
*	Fidelity Freedom Income Fund	Mutual fund		14,369
*	Fidelity International Discovery Fund	Mutual fund		499,410
*	Fidelity International Real Estate Fund	Mutual fund		5,231
*	Fidelity Leveraged Company Stock Fund	Mutual fund		302,940
*	Fidelity Managed Income Portfolio	Common/collective trust fund		76,724
*	Fidelity Mid Cap Growth Fund	Mutual fund		73,843
*	Fidelity Retirement Money Market Portfolio	Mutual fund		53,592
*	Fidelity Small Cap Stock Fund	Mutual fund		141,329
*	Fidelity Spartan 500 Index Fund	Mutual fund		210,730
*	Fidelity Spartan U.S. Bond Index Fund	Mutual fund		200,600
*	Fidelity Stock Select Small Cap	Mutual fund		40.414
*	Fidelity Strategic Income Fund	Mutual fund		223,607
*	Fidelity Value Fund	Mutual fund		329,723
	Total			4,776,360
*	Participant loans	Interest at 5%, maturing at various dates, secured by participant account balances.		47,911
	Total			\$ 4,824,271

* Party-in-interest. (A) Cost not required.

See Independent Auditor's Report.

Story Worldwide, LLC 401(k) Plan EIN # 20-2658265 Plan # 001

Schedule of Delinquent Participant Contributions (Schedule H, Line 4a) Year Ended December 31, 2012

(a) Participant Contributions Transferred Late to Plan	(b) Total that Constitute Nonexempt Prohibite <u>Transactions</u>		Total Fully Under	c) / Corrected / VFCP <u>= 2002-51</u>	(d) Check Here if Late Participant Loan Repayments are <u>Included</u>	(e) Contributions no <u>Corrected</u>	-	(f) contributions rected Outside <u>VFCP</u>	Pending	(g) tributions Correction VFCP	
\$ 18,412	\$ 18,4	2 *	\$	-	*	\$-	\$	18,412	\$	-	

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

See Independent Auditor's Report.

Financial Statements (With Supplementary Information) and Independent Auditor's Report

December 31, 2012

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Independent Auditor's Report

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

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Story Worldwide, LLC 401(k) Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statement of changes in net assets available for benefits for the year ended December 31, 2012, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the *Basis for Disclaimer of Opinion* paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

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 financial statements. 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 December 31, 2012 and 2011 and for the year ended December 31, 2012, that the information provided to the Plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Other Matters

The supplemental Schedule of Assets (Held at End of Year) (Schedule H, Line 4i) and Schedule of Delinquent Participant Contributions (Schedule H, Line 4a) as of or for the year ended December 31, 2012 are required by the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we do not express an opinion on these supplemental schedules.

Report on Form and Content in Compliance with DOL Rules and Regulations

The form and content of the information included in the 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.

Cohn Regnick LLP

Farmington, Connecticut October 8, 2013

Statements of Net Assets Available for Benefits December 31, 2012 and 2011

		2012	2011		
Assets: Investments, at fair value		4,776,360	\$	3,901,038	
Receivables: Participant contributions Employer contributions Notes receivable from participants		14,686 6,001 47,911		73,919	
Total receivables		68,598		73,919	
Net assets reflecting investments at fair value		4,844,958		3,974,957	
Adjustment from fair value to contract value for fully benefit-responsive investment contract		(2,196)		(1,555)	
Net assets available for benefits	\$	4,842,762	\$	3,973,402	

See Notes to Financial Statements.

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Statement of Changes in Net Assets Avaible for Benefits Year Ended December 31, 2012

Additions: Investment income: Net appreciation in fair value of investments Dividends Total investment income	\$ 520,955 86,061 607,016
Interest income on notes receivable from participants	 2,668
Contributions: Employer Participants Rollovers Total contributions	 239,538 487,686 9,326 736,550
Total additions	 1,346,234
Deductions: Benefits paid to participants Administrative expenses Total deductions	 476,673 201 476,874
Net increase	869,360
Net assets available for benefits: Beginning of year	 3,973,402
End of year	\$ 4,842,762

See Notes to Financial Statements.

Notes to Financial Statements

Note 1 - Description of the Plan:

The following description of the Story Worldwide, LLC 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete 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 safe harbor 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"). The Plan administrator is responsible for oversight of the Plan and determines the appropriateness of the Plan's investment offerings and monitors investment performance.

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 contribute amounts representing distributions from other qualified benefit or defined contribution plans (rollover). 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. Participants direct the investment of their contributions and safe harbor matching contributions into various investment options offered by the Plan. Contributions are subject to certain Internal Revenue Service ("IRS") limitations.

Participant accounts:

Each participant's account is credited with the participant's contribution and Company safe harbor matching contributions, as well as allocations of Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on the participant earnings, account balances, or specific participant transactions, 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 safe harbor matching contributions, plus actual earnings thereon.

Payment of benefits:

On termination of employment, retirement, the attainment of 59-1/2, death or permanent and total disability, a participant may elect to receive either a lump-sum amount, annual installments equal to the value of their account, or a direct rollover distribution. Participants may also take hardship distributions from their accounts. Distributions are subject to the applicable provisions of the Plan agreement.

Notes to Financial Statements

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. A participant may only have one loan outstanding at any time. The loan interest 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 automatic 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 present the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts is prepared using the contract value basis for fully benefit-responsive investment contracts.

Use of estimates:

The preparation of financial statements in accordance 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. The Plan administrator determines the Plan's valuation policies utilizing information provided by the trustee. See Note 5 for discussion of fair value measurements.

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Notes receivable from participants:

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2012 or 2011. If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Payment of benefits:

Benefits are recorded when paid.

Expenses:

Certain expenses of maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation of fair value of investments.

Subsequent events:

The Plan has evaluated subsequent events through October 8, 2013, the date the financial statements were available to be issued.

Note 3 - Certified investments:

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Investments and notes receivable from participants held at December 31, 2012 and 2011, and investment income and interest income on notes receivable from participants for the year ended December 31, 2012, that is disclosed in the accompanying financial statements and supplemental schedules, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by the trustee of the Plan.

Notes to Financial Statements

Note 4 - Investments:

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

	<u>2012</u>	<u>2011</u>
Fidelity Balanced Fund Fidelity Contrafund Fidelity Freedom 2040 Fund	\$ 524,268 545,992 770,563	\$ 424,522 428,829 566,397
Fidelity Freedom 2045 Fund Fidelity International Discovery Fund Fidelity Leveraged Company Stock Fund Fidelity Value Fund	323,318 499,410 302,940 329,723	242,596 360,616 211,144 237,291

During 2012, investments in mutual funds (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by \$520,955.

Note 5 - Fair value measurements:

The framework for measuring fair value 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) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820 are described as follows:

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

Level 2 Inputs to the valuation methodology include:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical 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.

Notes to Financial Statements

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 maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2012 and 2011.

- *Common/collective trust:* Valued at the net asset value ("NAV") of units of a bank collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.
- Mutual funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Notes to Financial Statements

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2012 and 2011:

Assets at Fair Value as of December 31, 2012

		Level 1		Level 2	Level 3			<u>Total</u>	
Mutual funds:									
Large cap	\$	851,014	\$		-	\$	-	\$ 851,014	
Mid cap		847,835			-		-	847,835	
Small cap		40,414			-		-	40,414	
International		504,641			-		-	504,641	
Blended		1,977,933			-		-	1,977,933	
Bond		424,207			-			424,207	
Short-term		<u>53,592</u>						53,592	
Total mutual funds		4,699,636			-		-	4,699,636	
Common/collective trust: Fidelity Managed Income									
Portfolio				76,7	<u>24</u>			76,724	
Total assets at fair value	<u>\$</u>	4,699,636	<u>\$</u>	76,7	<u>24</u>	<u>\$</u>		<u>\$ 4,776,360</u>	

Assets at Fair Value as of December 31, 2011

	Level 1	Level 2	Level 3	<u>Total</u>
Mutual funds:				
Large cap	\$ 636,88	5\$	- \$	- \$ 636,885
Mid cap	618,52	6	-	- 618,526
Small cap	30,00	0	-	- 30,000
International	361,57	3	-	- 361,573
Blended	1,778,84	7	-	- 1,778,847
Bond	347,46	9	-	- 347,469
Short-term	64,68	<u></u>		- 64,682
Total mutual funds	3,837,98	32	-	- 3,837,982
Common/collective trust: Fidelity Managed Income	2			
Portfolio		- 63,0		63,056
Total assets at fair value	<u>\$ 3,837,98</u>	<u>32</u> <u>\$ 63,0</u>	56 \$	<u>-</u> <u>\$ 3,901,038</u>

Notes to Financial Statements

Fair value of investments in entities that use NAV:

The following tables summarize investments measured at fair value based on NAV per share as of December 31, 2012 and 2011, respectively.

	T 1-14 bee	Unfunded	Redemption Frequency (if	Redemption
December 31, 2012 Common/collective trust - Fidelity Managed Income	<u>Fair Value</u>	<u>Commitments</u>	<u>currently eligible)</u>	Notice Period
Portfolio	\$76,724	n/a	Daily	30 days
		Unfunded	Redemption Frequency (if	Redemption
December 31, 2011 Common/collective trust - Fidelity Managed Income	<u>Fair Value</u>	<u>Commitments</u>	<u>currently eligible)</u>	<u>Notice Period</u>
Portfolio	\$63,056	n/a	Daily	30 days

Note 6 - 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.

Note 7 - Related party transactions and party-in-interest transactions:

Certain Plan assets include investments in funds managed by affiliates of Fidelity Management Trust Company ("FMTC"). FMTC is the Plan's trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for investment management services are included in net appreciation in fair value of the investment as they are paid by revenue sharing rather than a direct payment. As described in Note 2, the Plan made a direct payment to the third party administrator of \$201 which was not covered by revenue sharing. The Plan sponsor pays directly any other fees related to the Plan's operations.

Note 8 - 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. In the event of Plan termination, participants' account balances will be distributed in accordance with the Plan agreement.

Notes to Financial Statements

Note 9 - Tax status:

The Plan utilizes a Fidelity volume submitter Plan document, which obtained its latest opinion letter dated March 31, 2008 in which the IRS stated that the volume submitter Plan, as then designed, was in compliance with applicable requirements of the Internal Revenue Code (the "IRC"). Although, the Plan has been amended and restated since receiving the opinion letter, the Plan administrator believes that the Plan is designed and currently being operated in compliance with the applicable requirements of the IRC and, therefore, believes 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 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 2009.

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, 2012 and 2011 to Form 5500:

	<u>2012</u>	<u>2011</u>
Net assets available for benefits per the financial stateme	\$ 3,973,402	
Adjustment from fair value to contract value for fully benefit-responsive investment contract	2,196	1,555
Net assets available for benefits per Form 5500	<u>\$4,844,958</u>	<u>\$ 3,974,957</u>

The following is a reconciliation of investment income per the financial statements for the year ended December 31, 2012 to Form 5500:

Investment income per the financial statements	\$ 607,016			
Prior year adjustment from contract value to fair value for the investment contract Current year adjustment from contract	(1,555)			
value to fair value for the investment contract	2,196			
Investment income per Form 5500	<u>\$ 607,657</u>			

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

Notes to Financial Statements

Note 11 - Non-exempt transactions:

The Company determined that a nonexempt transaction occurred during 2011. This violation 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 8, 2012, for lost earnings in the amount of \$9. The Company believes that the transaction 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 EIN # 20-2658265 Plan # 001

Schedule of Assets (Held at End of Year) (Schedule H, Line 4i) December 31, 2012

<u>(a)</u>	(b)	(c)	(d)	(e)
	Identity of Issuer	Description	<u>Cost (A)</u>	Current Value
	American Beacon Large Cap Value Fund Investor Class	Mutual fund		\$ 67,976
*	Fidelity Balanced Fund	Mutual fund		524,268
*	Fidelity Capital Appreciation Fund	Mutual fund		26,316
*	Fidelity Contrafund	Mutual fund		545,992
*	Fidelity Freedom 2000 Fund	Mutual fund		48,408
*	Fidelity Freedom 2010 Fund	Mutual fund		357
*	Fidelity Freedom 2020 Fund	Mutual fund		23,972
*	Fidelity Freedom 2025 Fund	Mutual fund		47,686
*	Fidelity Freedom 2030 Fund	Mutual fund		62,390
*	Fidelity Freedom 2035 Fund	Mutual fund		101,628
*	Fidelity Freedom 2040 Fund	Mutual fund		770,563
*	Fidelity Freedom 2045 Fund	Mutual fund		323,318
*	Fidelity Freedom 2050 Fund	Mutual fund		60,090
*	Fidelity Freedom 2055 Fund	Mutual fund		884
*	Fidelity Freedom Income Fund	Mutual fund		14,369
*	Fidelity International Discovery Fund	Mutual fund		499,410
*	Fidelity International Real Estate Fund	Mutual fund		5,231
*	Fidelity Leveraged Company Stock Fund	Mutual fund		302,940
*	Fidelity Managed Income Portfolio	Common/collective trust fund		76,724
*	Fidelity Mid Cap Growth Fund	Mutual fund		73,843
*	Fidelity Retirement Money Market Portfolio	Mutual fund		53,592
*	Fidelity Small Cap Stock Fund	Mutual fund		141,329
*	Fidelity Spartan 500 Index Fund	Mutual fund		210,730
*	Fidelity Spartan U.S. Bond Index Fund	Mutual fund		200,600
*	Fidelity Stock Select Small Cap	Mutual fund		40.414
*	Fidelity Strategic Income Fund	Mutual fund		223,607
*	Fidelity Value Fund	Mutual fund		329,723
	Total			4,776,360
*	Participant loans	Interest at 5%, maturing at		
	·	various dates, secured by		
		participant account balances.		47,911
	Total			\$ 4,824,271

* Party-in-interest. (A) Cost not required.

See Independent Auditor's Report.

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Schedule of Delinquent Participant Contributions (Schedule H, Line 4a) Year Ended December 31, 2012

(a) Participant Contributions Transferred Late to Plan	(b) Total that Constitute Nonexempt Prohibite <u>Transactions</u>		Total Fully Under	c) / Corrected / VFCP <u>= 2002-51</u>	(d) Check Here if Late Participant Loan Repayments are <u>Included</u>	(e) Contributions no <u>Corrected</u>	-	(f) contributions rected Outside <u>VFCP</u>	Pending	(g) tributions Correction VFCP	
\$ 18,412	\$ 18,4	2 *	\$	-	*	\$-	\$	18,412	\$	-	

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

See Independent Auditor's Report.