

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2014 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2014 or fiscal plan year beginning <u>01/01/2014</u> and ending <u>12/31/2014</u>	
A This return/report is for:	☐ a multiemployer plan; ☒ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions); or ☐ a single-employer plan; ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>NORTH AMERICAN PUBLISHING COMPANY 401(K) PROFIT SHARING PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>002</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/1984</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>002</u>	1c Effective date of plan <u>01/01/1984</u>	
1b Three-digit plan number (PN) ▶	<u>002</u>				
1c Effective date of plan <u>01/01/1984</u>					
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) <u>NORTH AMERICAN PUBLISHING, COMPANY</u> <u>1500 SPRING GARDEN STREET</u> <u>12TH FLOOR</u> <u>PHILADELPHIA, PA 19130</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>23-1472948</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>215-238-5300</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>323100</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>23-1472948</u>	2c Plan Sponsor's telephone number <u>215-238-5300</u>	2d Business code (see instructions) <u>323100</u>	
2b Employer Identification Number (EIN) <u>23-1472948</u>					
2c Plan Sponsor's telephone number <u>215-238-5300</u>					
2d Business code (see instructions) <u>323100</u>					

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2015	JEANNE SCULLY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number) (optional)			Preparer's telephone number (optional)

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 149
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits..... d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 113 6a(2) 114 6b 1 6c 31 6d 146 6e 0 6f 146 6g 138 6h 5
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 Codes in the instructions: 2E 2F 2G 2J 2K 2R 2S 2T 3H 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 funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

Part III**Form M-1 Compliance Information (to be completed by welfare benefit plans)**

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2014 Form M-1 annual report. If the plan was not required to file the 2014 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2014
		This Form is Open to Public Inspection.

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan <u>NORTH AMERICAN PUBLISHING COMPANY 401(K) PROFIT SHARING PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>NORTH AMERICAN PUBLISHING, COMPANY</u>	D Employer Identification Number (EIN) <u>23-1472948</u>

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

04-2647786

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

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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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65 71	RECORDKEEPER	3585	Yes ☒ No ☐	Yes ☒ No ☐	0	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 ☐

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	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
DOMINI SOCIAL EQUITYINVESTOR 536 BROADWAY 7TH FLOOR NEW YORK, NY 10012	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
ABF LG CAP VAL INV - STATE STREET 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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
ALZGI NFJ SMCPLV ADM - BOSTON FINA 330 W. 9TH STREET KANSAS CITY, MO 66160	0.35%	

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		
LZRD EMRG MKTS EQ O - BOSTON FINAN P.O. BOX 8480 BOSTON, MA 02266	0.45%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
MSIF SM CO GRTH A - BOSTON FINANCI 330 W. 9TH STREET KANSAS CITY, MO 66160	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
TEMPLETON FOREIGN A - FRANKLIN TEM 94-3167260	0.40%	

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2014 This Form is Open to Public Inspection.
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For calendar plan year 2014 or fiscal plan year beginning	01/01/2014	and ending	12/31/2014
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A Name of plan NORTH AMERICAN PUBLISHING COMPANY 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN)	► 002
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C Plan or DFE sponsor's name as shown on line 2a of Form 5500 NORTH AMERICAN PUBLISHING,COMPANY	D Employer Identification Number (EIN) 23-1472948
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Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE:	MIP CL 1
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b Name of sponsor of entity listed in (a):	FIDELITY MANAGEMENT TRUST COMPANY
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c EIN-PN	04-3022712-024	d Entity code	C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	816817
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a Name of MTIA, CCT, PSA, or 103-12 IE:	
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b Name of sponsor of entity listed in (a):	
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c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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a Name of MTIA, CCT, PSA, or 103-12 IE:	
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b Name of sponsor of entity listed in (a):	
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c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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a Name of MTIA, CCT, PSA, or 103-12 IE:	
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b Name of sponsor of entity listed in (a):	
---	--

c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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a Name of MTIA, CCT, PSA, or 103-12 IE:	
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b Name of sponsor of entity listed in (a):	
---	--

c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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a Name of MTIA, CCT, PSA, or 103-12 IE:	
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b Name of sponsor of entity listed in (a):	
---	--

c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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a Name of MTIA, CCT, PSA, or 103-12 IE:	
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b Name of sponsor of entity listed in (a):	
---	--

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

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

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

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2014 This Form is Open to Public Inspection
For calendar plan year 2014 or fiscal plan year beginning <u>01/01/2014</u> and ending <u>12/31/2014</u>		
A Name of plan <u>NORTH AMERICAN PUBLISHING COMPANY 401(K) PROFIT SHARING PLAN</u>		B Three-digit plan number (PN) ► <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>NORTH AMERICAN PUBLISHING, COMPANY</u>		D Employer Identification Number (EIN) <u>23-1472948</u>

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	2110	0
(2) Participant contributions.....	1b(2)	13546	0
(3) Other.....	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	20609	82407
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common.....	1c(4)(B)	81933	151072
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property).....	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans.....	1c(8)	185208	152364
(9) Value of interest in common/collective trusts	1c(9)	862273	816817
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities.....	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	11666442	12198974
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	0	0

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	12832121	13401634

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	12832121	13401634
---	-----------	----------	----------

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)	86212	
(B) Participants	2a(1)(B)	557241	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		643453
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)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	7934	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		7940
(2) Dividends: (A) Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	1494	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	889831	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		891325
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	78582	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	83521	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-4939
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	-2618	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-2618

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		6911
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		-226461
c Other income.....	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		1315611

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	742826	
(2) To insurance carriers for the provision of benefits.....	2e(2)	0	
(3) Other.....	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		742826
f Corrective distributions (see instructions).....	2f		0
g Certain deemed distributions of participant loans (see instructions).....	2g		0
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees.....	2i(1)	0	
(2) Contract administrator fees.....	2i(2)	0	
(3) Investment advisory and management fees.....	2i(3)	3	
(4) Other.....	2i(4)	3269	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		3272
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		746098

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		569513
l Transfers of assets:			
(1) To this plan.....	2l(1)		0
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

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

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

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

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☒ Yes ☐ No

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

(1) Name: HAEFELE FLANAGAN

(2) EIN: 22-3008776

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....

	Yes	No	Amount
4a		X	
4b		X	

	Yes	No	Amount
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.)		X	
4c			
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.).....		X	
4d			
e Was this plan covered by a fidelity bond?	X		500000
4e			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f			
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?.....		X	
4g			
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?.....		X	
4h			
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i			
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.)		X	
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?		X	
4k			
l Has the plan failed to provide any benefit when due under the plan?.....		X	
4l			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m			
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.		X	
4n			

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

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

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

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? ☐ Yes ☐ No ☐ Not determined

Part V Trust Information (optional)

6a Name of trust	6b Trust's EIN

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2014 This Form is Open to Public Inspection.
---	--	--

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan <u>NORTH AMERICAN PUBLISHING COMPANY 401(K) PROFIT SHARING PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>NORTH AMERICAN PUBLISHING,COMPANY</u>	D Employer Identification Number (EIN) <u>23-1472948</u>

Part I	Distributions
---------------	----------------------

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>04-6568107</u>	
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.	
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
----------------	--

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....	6a		
b Enter the amount contributed by the employer to the plan for this plan year.....	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?.....	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☐ No	☐ N/A

Part III	Amendments
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☐ No
--	-----------------------------------	-----------------------------------	-------------------------------	-----------------------------

Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.).....	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	14a	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	14c	

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If 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, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

- 19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

PLAN NAME: North American Publishing Company 401(k) Profit Sharing Plan

PLAN SPONSOR NAME: North American Publishing Company

EMPLOYER'S IDENTIFICATION NUMBER: 23-1472948

PLAN NUMBER: 002

ATTACHMENT TO FORM 5500

MULTIPLE-EMPLOYER PLAN INFORMATION

12/31/2014

<u>EMPLOYER NAME</u>	<u>EIN</u>	<u>ESTIMATE OF CONTRIBUTION %</u>
North American Publishing Company	23-1472948	94.06%
Foster Manufacturing Company	23-1472949	5.94%

**NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013**

**NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
FINANCIAL STATEMENTS**

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HAEFELE FLANAGAN

CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

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INDEPENDENT AUDITOR'S REPORT

To the Plan Sponsor
North American Publishing Company
401(k) Profit Sharing Plan
Philadelphia, Pennsylvania

We were engaged to audit the accompanying financial statements of **NORTH AMERICAN PUBLISHING COMPANY 401(k) PROFIT SHARING PLAN**, which comprise the statements of net assets available for benefits as of December 31, 2014 and 2013, and the related statement of changes in net assets available for benefits for the year ended December 31, 2014, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan 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 our audits 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 the 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 and for the years ended December 31, 2014 and 2013 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 Matter

The supplemental Schedule of Assets Held at End of Year is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is 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 the supplemental schedule referred to above.

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 schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Haefele, Flanagan & Co., P.C.

Maple Shade, New Jersey
October 12, 2015

NORTH AMERICAN PUBLISHING COMPANY 401(k) PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2014 AND 2013

	<u>2014</u>	<u>2013</u>
Investments at fair value	\$ 13,249,270	\$ 12,631,257
Receivables		
Participant contributions	-0-	13,546
Employer contributions	-0-	2,110
Notes receivable from participants	<u>152,364</u>	<u>185,208</u>
Total receivables	152,364	200,864
Net assets reflecting benefits at fair value	13,401,634	12,832,121
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	<u>(11,939)</u>	<u>(12,997)</u>
Net assets available for benefits	<u><u>\$ 13,389,695</u></u>	<u><u>\$ 12,819,124</u></u>

**NORTH AMERICAN PUBLISHING COMPANY 401(k) PROFIT SHARING PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2014**

Additions to net assets attributed to:

Investment income

Net appreciation (depreciation) in fair value of investments:

Registered investment companies	\$ (226,461)
---------------------------------	--------------

Common collective trust	7,969
-------------------------	-------

Participant-directed brokerage accounts	(2,618)
---	---------

Net loss on sale of assets	(4,939)
----------------------------	---------

Interest on interest bearing cash	6
-----------------------------------	---

Dividends

Registered investment companies	889,831
---------------------------------	---------

Participant-directed brokerage accounts	1,494
---	-------

	665,282
--	---------

Interest income on notes receivable from participants	7,934
---	-------

Contributions

Participant	557,241
-------------	---------

Employer	86,212
----------	--------

	643,453
--	---------

Total additions to net assets	1,316,669
-------------------------------	-----------

Deductions from net assets attributed to:

Benefits paid to participants	742,826
-------------------------------	---------

Administrative expenses	3,272
-------------------------	-------

Total deductions from net assets	746,098
----------------------------------	---------

Net increase in assets available for benefits	570,571
---	---------

Net assets available for benefits

Beginning of year	12,819,124
-------------------	------------

End of year	\$ 13,389,695
-------------	---------------

See notes to financial statements.

**NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013**

Note 1 – Description of Plan

The following description of the North American Publishing Company 401(k) Profit Sharing Plan ("the Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

1. **General:** The Plan is a multiple employer defined contribution plan established for the benefit of the employees of North American Publishing Company and Foster Manufacturing Company ("the Company"). North American Publishing Company is the Plan Sponsor and Administrator. The Trustee of the Plan is Fidelity Management Trust Company ("Fidelity Management") and the Participant Record Keeper of the Plan is Fidelity Investments Institutional Operations Company, Inc. ("Fidelity Investments"). The Plan is subject to the provisions of the Employee's Retirement Income Security Act of 1974 (ERISA).
2. **Eligibility:** Employees of the Company who have reached 21 years of age and have completed three months of continuous employment are eligible to participate in the Plan. For the Profit Sharing Contribution, the participant must be employed on the last day of the Plan year and have performed at least 1,000 hours of service. Participants are automatically enrolled in the Plan. If a participant is automatically enrolled, the Company will deduct 3% of eligible compensation, increasing 1% each year until it reaches 10%, unless and/or until the participant elects otherwise. The contributions are automatically invested in a Fidelity Freedom Fund based upon the participant's age at the time of the investment, unless and/or until the participant elects otherwise.
3. **Participant Accounts:** Each participant account is credited with the participant's elective deferral contributions and allocations of (1) the Company's matching contributions, (2) the Company's profit sharing contributions, and (3) plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.
4. **Contributions:** Each year participants may make salary deferral contributions in any percentage up to 75% of their pretax annual compensation, as defined in the Plan, up to a maximum of \$17,500 in 2014. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions up to \$5,500 in 2014. The Company contributes 25% of the first 5% of employee deferrals. In addition, discretionary contributions may be made to the Plan by the Company. The Plan currently offers various registered investment companies and a common

NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013

Note 1 – Description of Plan (continued)

4. Contributions: (continued)

collective trust as investment options for participants. Participants also have the option of investing their money into participant-directed brokerage accounts. Participants may change their investment options via contact with the record keeper.

5. **Vesting:** Participants are immediately 100% vested in their salary deferral contributions plus actual earnings thereon. The portion of the participant's account attributable to the Company's matching and profit sharing contributions become 25% vested after 1 year of service as defined, and continues to vest at the rate of 25% for each successive year of service until 100% vested after 4 years of service.

6. **Payment of Benefits:** Upon termination of service due to death, disability, or retirement, a participant will receive a lump-sum amount equal to the value of the participant's vested interest in his or her account. For termination of service for other reasons, a participant may either directly roll over their vested account balance to an individual retirement account or another employer plan, or receive a distribution of the balance as a lump-sum payment.

7. **Forfeited Accounts:** At December 31, 2014 and 2013, forfeited nonvested accounts totaled \$24,795 and \$19,590, respectively. These accounts will be used to reduce the Company matching contributions and to pay the cost of administration of the Plan. Any remaining balance is allocated to the participant accounts based on participant account balances. In 2014, administrative fees were reduced by forfeitures in the amount of \$1,848.

8. **Notes Receivable from Participants:** Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 10%, which are commensurate with local prevailing rates as determined quarterly by the plan administrator. Principal and interest is paid ratably through monthly payroll deductions.

Note 2 – Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013

Note 2 – Summary of Significant Accounting Policies (continued)

Basis of Accounting (continued)

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 Statement of Net Assets Available for Benefits presents the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's 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 sponsor determines the Plan's valuation policies utilizing information provided by the investment advisors, custodians and insurance company. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual 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, 2014 and 2013. 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.

NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013

Note 2 – Summary of Significant Accounting Policies (continued)

Administrative 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 depreciation of fair value of investments.

Note 3 – Investments Certified by Fidelity Management Trust Company

The Plan Administrator has elected the method of compliance as permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to the following information certified by Fidelity Management Trust Company, except for comparing such information certified by the trustee to information included in the Plan's financial statements and supplemental schedule.

The following table presents the fair value of the participant-directed investments in this Plan that was certified by Fidelity Management Trust Company. Single investments representing more than 5% of the Plan's net assets as of December 31, 2014 and 2013 are separately identified.

	<u>2014</u>	<u>2013</u>
Fidelity Freedom 2030 Fund	\$ 1,256,602	\$ 1,181,124
Fidelity Capital Appreciation Fund	1,119,656	1,212,178
Fidelity High Income	927,520	977,346
Fidelity Mid Cap Stock Fund	901,580	816,311
Fidelity Low-Priced Stock Fund	872,490	794,921
Fidelity Managed Income Portfolio	816,817	862,273
Fidelity Value Fund	787,462	691,312
SPTN Total Market Index ADV	782,757	653,920
Fidelity Freedom 2020 Fund	715,579	656,973
Fidelity Freedom 2025 Fund	677,501	591,090
Allianz NFJ Small Cap Value Fund	658,845	649,909
ABF Large Cap Value Fund	609,666	616,420
Fidelity Diversified International Fund	600,502	582,064
Fidelity Freedom 2035 Fund	597,328	531,290
Other Investments	1,924,965	1,817,126
	<u>\$ 13,249,270</u>	<u>\$ 12,631,257</u>

NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013

Note 3 – Investments Certified by Fidelity Management Trust Company (continued)

Fidelity Management Trust Company also certified to the completeness and accuracy of notes receivable from participants in the amount of \$152,364 and \$185,208 as of December 31, 2014 and 2013, \$7,934 of interest related to notes receivable from participants and \$891,325 of dividends, \$6 of interest bearing cash, and \$4,939 of net loss on sale of assets for the year ended December 31, 2014. During 2014, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) depreciated in value by (\$221,110) as follows:

Registered investment companies	\$ (226,461)
Common collective trust	7,969
Participant-directed brokerage accounts	<u>(2,618)</u>
Total	<u>\$ (221,110)</u>

Note 4 – Fair Value Measurements

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

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 3 inputs were used only when Level 1 or Level 2 inputs were not available.

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, 2014 and 2013.

Registered investment companies: Valued at the daily closing price as reported by the fund. Registered investment companies 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 net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013

Note 4 – Fair Value Measurements (continued)

Common collective trust: Value has been determined by the trustee sponsoring the common collective trust by dividing the trust's net assets at fair value by its units outstanding at the valuation dates.

Participant-directed brokerage accounts: Based on quoted net asset values of the shares held by the Plan at year-end.

	<u>Fair Value Measurements Using:</u>		
	<u>Fair Value</u>	<u>Level 1</u>	<u>Level 2</u>
<u>December 31, 2014</u>			
Registered investment companies			
Balanced	\$ 4,811,200	\$ 4,811,200	\$ -0-
Equity	6,850,111	6,850,111	-0-
Fixed income	522,712	522,712	-0-
Common collective trust			
Value	816,817	-0-	816,817
Participant-directed brokerage accounts			
Cash	71,095	71,095	-0-
Common Stocks	151,072	151,072	-0-
Mutual Funds	<u>26,263</u>	<u>26,263</u>	<u>-0-</u>
	<u>\$ 13,249,270</u>	<u>\$ 12,432,453</u>	<u>\$ 816,817</u>

	<u>Fair Value Measurements Using:</u>		
	<u>Fair Value</u>	<u>Level 1</u>	<u>Level 2</u>
<u>December 31, 2013</u>			
Registered investment companies			
Balanced	\$ 4,538,620	\$ 4,538,620	\$ -0-
Equity	6,601,116	6,601,116	-0-
Fixed income	516,246	516,246	-0-
Common collective trust			
Value	862,273	-0-	862,273
Participant-directed brokerage accounts			
Cash	20,609	20,609	-0-
Common Stocks	81,933	81,933	-0-
Mutual Funds	<u>10,460</u>	<u>10,460</u>	<u>-0-</u>
	<u>\$ 12,631,257</u>	<u>\$ 11,768,984</u>	<u>\$ 862,273</u>

NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013

Note 5 – Tax Status

The Internal Revenue Service has determined and informed the Plan by a letter dated March 31, 2008, that the Plan and the related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan Administrator and the Plan's tax counsel believe the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore the Plan is qualified and the related trust is tax exempt.

Accounting principles generally accepted in the United States of America requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. 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 2012.

Note 6 – Plan Termination

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

Note 7 – Risks and Uncertainties

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

Note 8 – Related Party Transactions

Certain Plan investments are shares of mutual funds managed by Fidelity. Fidelity is the trustee, as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for the investment management services are included in net appreciation in fair value of the investment, as they are paid through the trust assets, rather than direct payments. Fees paid by the Plan to Fidelity for administrative expenses amounted to \$3,272 for the year ended December 31, 2014.

NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013

Note 9 – Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements as of December 31, 2014 and 2013 to Form 5500:

	<u>2014</u>	<u>2013</u>
Net assets available for benefits per financial statements	\$ 13,389,695	\$ 12,819,124
Add: Adjustments from fair value to contract value for fully benefit-responsive investment contracts	<u>11,939</u>	<u>12,997</u>
Net assets available for benefits per Form 5500	<u>\$ 13,401,634</u>	<u>\$ 12,832,121</u>

The following is a reconciliation of the net increase in net assets available for benefits per the financial statements to the Form 5500, for the year ended December 31, 2014.

Net increase in net assets available per financial statements	\$ 570,571
Less: Prior year adjustments from fair value to contract value for fully benefit-responsive investment contracts	(12,997)
Add: Current year adjustments from fair value to contract value for fully benefit-responsive investment contracts	<u>11,939</u>
Net increase in assets available for benefits per Form 5500	<u>\$ 569,513</u>

Note 10 – Subsequent Events

The Plan has evaluated subsequent events through October 12, 2015, the date these financial statements were available to be issued.

NORTH AMERICAN PUBLISHING COMPANY 401(k) PROFIT SHARING PLAN
 EIN 23-1472948 PLAN # 002
 FORM 5500, SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS HELD AT END OF YEAR
 DECEMBER 31, 2014

(a)	(b) Identity of Issue	(c) Description	(d) Cost	(e) Current Value
*	Fidelity Management Trust Company	Fidelity Freedom 2030 Fund	N/A	\$ 1,256,602
*	Fidelity Management Trust Company	Fidelity Capital Appreciation Fund	N/A	1,119,656
*	Fidelity Management Trust Company	Fidelity High Income	N/A	927,520
*	Fidelity Management Trust Company	Fidelity Mid Cap Stock Fund	N/A	901,580
*	Fidelity Management Trust Company	Fidelity Low-Priced Stock Fund	N/A	872,490
*	Fidelity Management Trust Company	Fidelity Managed Income Portfolio	N/A	816,817
*	Fidelity Management Trust Company	Fidelity Value Fund	N/A	787,462
	Fidelity Management Trust Company	SPTN Total Market Index ADV	N/A	782,757
*	Fidelity Management Trust Company	Fidelity Freedom 2020 Fund	N/A	715,579
*	Fidelity Management Trust Company	Fidelity Freedom 2025 Fund	N/A	677,501
	Fidelity Management Trust Company	Allianz NFJ Small Cap Value Fund	N/A	658,845
	Fidelity Management Trust Company	ABF Large Cap Value Fund	N/A	609,666
*	Fidelity Management Trust Company	Fidelity Diversified International Fund	N/A	600,502
*	Fidelity Management Trust Company	Fidelity Freedom 2035 Fund	N/A	597,328
	Fidelity Management Trust Company	SPTN US Bond IDX ADV	N/A	522,712
	Fidelity Management Trust Company	Templeton Foreign Fund	N/A	226,881
*	Fidelity Management Trust Company	Fidelity Freedom 2050 Fund	N/A	178,979
*	Fidelity Management Trust Company	Fidelity Freedom 2040 Fund	N/A	177,285
*	Fidelity Management Trust Company	MSI Small Company Growth Fund	N/A	145,220
*	Fidelity Management Trust Company	Fidelity Freedom 2015 Fund	N/A	126,398
*	Fidelity Management Trust Company	Fidelity Small Cap Stock Fund	N/A	79,929
*	Fidelity Management Trust Company	Fidelity Freedom 2045 Fund	N/A	78,485
	Fidelity Management Trust Company	Lazard Emerging Markets Equity Portfolio - Open Class	N/A	65,123
*	Fidelity Management Trust Company	Fidelity Freedom Income Fund	N/A	32,089
*	Fidelity Management Trust Company	Fidelity Freedom 2055 Fund	N/A	17,713
*	Fidelity Management Trust Company	Fidelity Freedom 2005 Fund	N/A	14,410
*	Fidelity Management Trust Company	Fidelity Retire MMKT	N/A	11,311
	Sub-total:			13,000,840
	Fidelity Management Trust Company	Participant-Directed brokerage Accounts	N/A	248,430
	Sub-total. Total assets held for investment			\$ 13,249,270
	The Plan	Employee loans (interest rates 4 25% - 10%)		152,364
	Total assets available for benefits			\$ 13,401,634

**NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013**

**NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
FINANCIAL STATEMENTS**

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HAEFELE FLANAGAN

CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

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INDEPENDENT AUDITOR'S REPORT

To the Plan Sponsor
North American Publishing Company
401(k) Profit Sharing Plan
Philadelphia, Pennsylvania

We were engaged to audit the accompanying financial statements of **NORTH AMERICAN PUBLISHING COMPANY 401(k) PROFIT SHARING PLAN**, which comprise the statements of net assets available for benefits as of December 31, 2014 and 2013, and the related statement of changes in net assets available for benefits for the year ended December 31, 2014, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan 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 our audits 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 the 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 and for the years ended December 31, 2014 and 2013 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 Matter

The supplemental Schedule of Assets Held at End of Year is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is 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 the supplemental schedule referred to above.

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 schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Haefele, Flanagan & Co., P.C.

Maple Shade, New Jersey
October 12, 2015

**NORTH AMERICAN PUBLISHING COMPANY 401(k) PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2014 AND 2013**

	<u>2014</u>	<u>2013</u>
Investments at fair value	\$ 13,249,270	\$ 12,631,257
Receivables		
Participant contributions	-0-	13,546
Employer contributions	-0-	2,110
Notes receivable from participants	<u>152,364</u>	<u>185,208</u>
Total receivables	152,364	200,864
Net assets reflecting benefits at fair value	13,401,634	12,832,121
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	<u>(11,939)</u>	<u>(12,997)</u>
Net assets available for benefits	<u>\$ 13,389,695</u>	<u>\$ 12,819,124</u>

**NORTH AMERICAN PUBLISHING COMPANY 401(k) PROFIT SHARING PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2014**

Additions to net assets attributed to:

Investment income

Net appreciation (depreciation) in fair value of investments:

Registered investment companies	\$ (226,461)
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Common collective trust	7,969
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Participant-directed brokerage accounts	(2,618)
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Net loss on sale of assets	(4,939)
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Interest on interest bearing cash	6
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Dividends

Registered investment companies	889,831
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Participant-directed brokerage accounts	1,494
---	-------

	665,282
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Interest income on notes receivable from participants	7,934
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Contributions

Participant	557,241
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Employer	86,212
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	643,453
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Total additions to net assets	1,316,669
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Deductions from net assets attributed to:

Benefits paid to participants	742,826
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Administrative expenses	3,272
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Total deductions from net assets	746,098
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Net increase in assets available for benefits	570,571
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Net assets available for benefits

Beginning of year	12,819,124
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End of year	\$ 13,389,695
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See notes to financial statements.

**NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013**

Note 1 – Description of Plan

The following description of the North American Publishing Company 401(k) Profit Sharing Plan ("the Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

1. **General:** The Plan is a multiple employer defined contribution plan established for the benefit of the employees of North American Publishing Company and Foster Manufacturing Company ("the Company"). North American Publishing Company is the Plan Sponsor and Administrator. The Trustee of the Plan is Fidelity Management Trust Company ("Fidelity Management") and the Participant Record Keeper of the Plan is Fidelity Investments Institutional Operations Company, Inc. ("Fidelity Investments"). The Plan is subject to the provisions of the Employee's Retirement Income Security Act of 1974 (ERISA).
2. **Eligibility:** Employees of the Company who have reached 21 years of age and have completed three months of continuous employment are eligible to participate in the Plan. For the Profit Sharing Contribution, the participant must be employed on the last day of the Plan year and have performed at least 1,000 hours of service. Participants are automatically enrolled in the Plan. If a participant is automatically enrolled, the Company will deduct 3% of eligible compensation, increasing 1% each year until it reaches 10%, unless and/or until the participant elects otherwise. The contributions are automatically invested in a Fidelity Freedom Fund based upon the participant's age at the time of the investment, unless and/or until the participant elects otherwise.
3. **Participant Accounts:** Each participant account is credited with the participant's elective deferral contributions and allocations of (1) the Company's matching contributions, (2) the Company's profit sharing contributions, and (3) plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.
4. **Contributions:** Each year participants may make salary deferral contributions in any percentage up to 75% of their pretax annual compensation, as defined in the Plan, up to a maximum of \$17,500 in 2014. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions up to \$5,500 in 2014. The Company contributes 25% of the first 5% of employee deferrals. In addition, discretionary contributions may be made to the Plan by the Company. The Plan currently offers various registered investment companies and a common

NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013

Note 1 – Description of Plan (continued)

4. Contributions: (continued)

collective trust as investment options for participants. Participants also have the option of investing their money into participant-directed brokerage accounts. Participants may change their investment options via contact with the record keeper.

5. **Vesting:** Participants are immediately 100% vested in their salary deferral contributions plus actual earnings thereon. The portion of the participant's account attributable to the Company's matching and profit sharing contributions become 25% vested after 1 year of service as defined, and continues to vest at the rate of 25% for each successive year of service until 100% vested after 4 years of service.

6. **Payment of Benefits:** Upon termination of service due to death, disability, or retirement, a participant will receive a lump-sum amount equal to the value of the participant's vested interest in his or her account. For termination of service for other reasons, a participant may either directly roll over their vested account balance to an individual retirement account or another employer plan, or receive a distribution of the balance as a lump-sum payment.

7. **Forfeited Accounts:** At December 31, 2014 and 2013, forfeited nonvested accounts totaled \$24,795 and \$19,590, respectively. These accounts will be used to reduce the Company matching contributions and to pay the cost of administration of the Plan. Any remaining balance is allocated to the participant accounts based on participant account balances. In 2014, administrative fees were reduced by forfeitures in the amount of \$1,848.

8. **Notes Receivable from Participants:** Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 10%, which are commensurate with local prevailing rates as determined quarterly by the plan administrator. Principal and interest is paid ratably through monthly payroll deductions.

Note 2 – Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

NORTH AMERICAN PUBLISHING COMPANY
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2014 AND 2013

Note 2 – Summary of Significant Accounting Policies (continued)

Basis of Accounting (continued)

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 Statement of Net Assets Available for Benefits presents the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's 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 sponsor determines the Plan's valuation policies utilizing information provided by the investment advisors, custodians and insurance company. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual 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, 2014 and 2013. 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.

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Note 2 – Summary of Significant Accounting Policies (continued)

Administrative 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 depreciation of fair value of investments.

Note 3 – Investments Certified by Fidelity Management Trust Company

The Plan Administrator has elected the method of compliance as permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to the following information certified by Fidelity Management Trust Company, except for comparing such information certified by the trustee to information included in the Plan's financial statements and supplemental schedule.

The following table presents the fair value of the participant-directed investments in this Plan that was certified by Fidelity Management Trust Company. Single investments representing more than 5% of the Plan's net assets as of December 31, 2014 and 2013 are separately identified.

	<u>2014</u>	<u>2013</u>
Fidelity Freedom 2030 Fund	\$ 1,256,602	\$ 1,181,124
Fidelity Capital Appreciation Fund	1,119,656	1,212,178
Fidelity High Income	927,520	977,346
Fidelity Mid Cap Stock Fund	901,580	816,311
Fidelity Low-Priced Stock Fund	872,490	794,921
Fidelity Managed Income Portfolio	816,817	862,273
Fidelity Value Fund	787,462	691,312
SPTN Total Market Index ADV	782,757	653,920
Fidelity Freedom 2020 Fund	715,579	656,973
Fidelity Freedom 2025 Fund	677,501	591,090
Allianz NFJ Small Cap Value Fund	658,845	649,909
ABF Large Cap Value Fund	609,666	616,420
Fidelity Diversified International Fund	600,502	582,064
Fidelity Freedom 2035 Fund	597,328	531,290
Other Investments	1,924,965	1,817,126
	<u>\$ 13,249,270</u>	<u>\$ 12,631,257</u>

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DECEMBER 31, 2014 AND 2013

Note 3 – Investments Certified by Fidelity Management Trust Company (continued)

Fidelity Management Trust Company also certified to the completeness and accuracy of notes receivable from participants in the amount of \$152,364 and \$185,208 as of December 31, 2014 and 2013, \$7,934 of interest related to notes receivable from participants and \$891,325 of dividends, \$6 of interest bearing cash, and \$4,939 of net loss on sale of assets for the year ended December 31, 2014. During 2014, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) depreciated in value by (\$221,110) as follows:

Registered investment companies	\$ (226,461)
Common collective trust	7,969
Participant-directed brokerage accounts	<u>(2,618)</u>
Total	<u>\$ (221,110)</u>

Note 4 – Fair Value Measurements

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

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 3 inputs were used only when Level 1 or Level 2 inputs were not available.

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, 2014 and 2013.

Registered investment companies: Valued at the daily closing price as reported by the fund. Registered investment companies 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 net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

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Note 4 – Fair Value Measurements (continued)

Common collective trust: Value has been determined by the trustee sponsoring the common collective trust by dividing the trust's net assets at fair value by its units outstanding at the valuation dates.

Participant-directed brokerage accounts: Based on quoted net asset values of the shares held by the Plan at year-end.

	<u>Fair Value Measurements Using:</u>		
	<u>Fair Value</u>	<u>Level 1</u>	<u>Level 2</u>
<u>December 31, 2014</u>			
Registered investment companies			
Balanced	\$ 4,811,200	\$ 4,811,200	\$ -0-
Equity	6,850,111	6,850,111	-0-
Fixed income	522,712	522,712	-0-
Common collective trust			
Value	816,817	-0-	816,817
Participant-directed brokerage accounts			
Cash	71,095	71,095	-0-
Common Stocks	151,072	151,072	-0-
Mutual Funds	<u>26,263</u>	<u>26,263</u>	<u>-0-</u>
	<u>\$ 13,249,270</u>	<u>\$ 12,432,453</u>	<u>\$ 816,817</u>

	<u>Fair Value Measurements Using:</u>		
	<u>Fair Value</u>	<u>Level 1</u>	<u>Level 2</u>
<u>December 31, 2013</u>			
Registered investment companies			
Balanced	\$ 4,538,620	\$ 4,538,620	\$ -0-
Equity	6,601,116	6,601,116	-0-
Fixed income	516,246	516,246	-0-
Common collective trust			
Value	862,273	-0-	862,273
Participant-directed brokerage accounts			
Cash	20,609	20,609	-0-
Common Stocks	81,933	81,933	-0-
Mutual Funds	<u>10,460</u>	<u>10,460</u>	<u>-0-</u>
	<u>\$ 12,631,257</u>	<u>\$ 11,768,984</u>	<u>\$ 862,273</u>

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Note 5 – Tax Status

The Internal Revenue Service has determined and informed the Plan by a letter dated March 31, 2008, that the Plan and the related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan Administrator and the Plan's tax counsel believe the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore the Plan is qualified and the related trust is tax exempt.

Accounting principles generally accepted in the United States of America requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. 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 2012.

Note 6 – Plan Termination

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

Note 7 – Risks and Uncertainties

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

Note 8 – Related Party Transactions

Certain Plan investments are shares of mutual funds managed by Fidelity. Fidelity is the trustee, as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for the investment management services are included in net appreciation in fair value of the investment, as they are paid through the trust assets, rather than direct payments. Fees paid by the Plan to Fidelity for administrative expenses amounted to \$3,272 for the year ended December 31, 2014.

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Note 9 – Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements as of December 31, 2014 and 2013 to Form 5500:

	<u>2014</u>	<u>2013</u>
Net assets available for benefits per financial statements	\$ 13,389,695	\$ 12,819,124
Add: Adjustments from fair value to contract value for fully benefit-responsive investment contracts	<u>11,939</u>	<u>12,997</u>
Net assets available for benefits per Form 5500	<u>\$ 13,401,634</u>	<u>\$ 12,832,121</u>

The following is a reconciliation of the net increase in net assets available for benefits per the financial statements to the Form 5500, for the year ended December 31, 2014.

Net increase in net assets available per financial statements	\$ 570,571
Less: Prior year adjustments from fair value to contract value for fully benefit-responsive investment contracts	(12,997)
Add: Current year adjustments from fair value to contract value for fully benefit-responsive investment contracts	<u>11,939</u>
Net increase in assets available for benefits per Form 5500	<u>\$ 569,513</u>

Note 10 – Subsequent Events

The Plan has evaluated subsequent events through October 12, 2015, the date these financial statements were available to be issued.

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 FORM 5500, SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS HELD AT END OF YEAR
 DECEMBER 31, 2014

(a)	(b) Identity of Issue	(c) Description	(d) Cost	(e) Current Value
*	Fidelity Management Trust Company	Fidelity Freedom 2030 Fund	N/A	\$ 1,256,602
*	Fidelity Management Trust Company	Fidelity Capital Appreciation Fund	N/A	1,119,656
*	Fidelity Management Trust Company	Fidelity High Income	N/A	927,520
*	Fidelity Management Trust Company	Fidelity Mid Cap Stock Fund	N/A	901,580
*	Fidelity Management Trust Company	Fidelity Low-Priced Stock Fund	N/A	872,490
*	Fidelity Management Trust Company	Fidelity Managed Income Portfolio	N/A	816,817
*	Fidelity Management Trust Company	Fidelity Value Fund	N/A	787,462
	Fidelity Management Trust Company	SPTN Total Market Index ADV	N/A	782,757
*	Fidelity Management Trust Company	Fidelity Freedom 2020 Fund	N/A	715,579
*	Fidelity Management Trust Company	Fidelity Freedom 2025 Fund	N/A	677,501
	Fidelity Management Trust Company	Allianz NFJ Small Cap Value Fund	N/A	658,845
	Fidelity Management Trust Company	ABF Large Cap Value Fund	N/A	609,666
*	Fidelity Management Trust Company	Fidelity Diversified International Fund	N/A	600,502
*	Fidelity Management Trust Company	Fidelity Freedom 2035 Fund	N/A	597,328
	Fidelity Management Trust Company	SPTN US Bond IDX ADV	N/A	522,712
	Fidelity Management Trust Company	Templeton Foreign Fund	N/A	226,881
*	Fidelity Management Trust Company	Fidelity Freedom 2050 Fund	N/A	178,979
*	Fidelity Management Trust Company	Fidelity Freedom 2040 Fund	N/A	177,285
*	Fidelity Management Trust Company	MSI Small Company Growth Fund	N/A	145,220
*	Fidelity Management Trust Company	Fidelity Freedom 2015 Fund	N/A	126,398
*	Fidelity Management Trust Company	Fidelity Small Cap Stock Fund	N/A	79,929
*	Fidelity Management Trust Company	Fidelity Freedom 2045 Fund	N/A	78,485
	Fidelity Management Trust Company	Lazard Emerging Markets Equity Portfolio - Open Class	N/A	65,123
*	Fidelity Management Trust Company	Fidelity Freedom Income Fund	N/A	32,089
*	Fidelity Management Trust Company	Fidelity Freedom 2055 Fund	N/A	17,713
*	Fidelity Management Trust Company	Fidelity Freedom 2005 Fund	N/A	14,410
*	Fidelity Management Trust Company	Fidelity Retire MMKT	N/A	11,311
	Sub-total:			13,000,840
	Fidelity Management Trust Company	Participant-Directed brokerage Accounts	N/A	248,430
	Sub-total. Total assets held for investment			\$ 13,249,270
	The Plan	Employee loans (interest rates 4 25% - 10%)		152,364
	Total assets available for benefits			\$ 13,401,634