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FINANCIAL DISCLOSURE STATEMENT  Period covered: January 1, 2012 - April 30 2013  For use by candidates and new employees	LEGISLA]	LEGISLATIVE RESOURCE CENTER
Daytime Telephone:	2012 14	2012 MAY 24 AM 9: 57
CHRIS STEWART	U.S. PJUS U.S. PJUS (Office Use Only)	GREICE OF THE SLERK U.S. MUUSE OF REPRESENTATIVES Use Only)
Filter  Candidate for the State: UTAH  Date of Check if A \$200 pe  Filter  House of Representatives District: Election: Amendment	**	essed
Employing Office:	more than 30 days late.	Who mes
In all sections, please type or print clearly in blue or black ink.  PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS		
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?  Yes No II. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years?  If yes, complete and attach Schedule IV.	Yes X	S
II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period?  Yes No With an outside entity?  Wes, complete and attach Schedule V.  If yes, complete and attach Schedule V.	Yes	N <sub>O</sub>
III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?  Yes No If yes, complete and attach Schedule III.  VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years?  If yes, complete and attach Schedule VI.	Yes X	<u>8</u>
Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	esponse.	
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS	QUESTION	ร์
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child?	Yes	No X
<b>EXEMPTION</b> —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes	N <sub>O</sub>

## SCHEDULE I - EARNED INCOME (INCLUDING HONORARIA)

Name CHRIS STEWART

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income	han the filer's current employme mount of any honoraria; list only	ent by the U.S. Governme y the source for other spo	nt) totalling \$200 or use earned income
exceeding \$1,000. See examples below. <b>Exclude:</b> Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits	ment programs, and benefits re	received under the Social Security Act.	Security Act.
Cartain Cartain Later of company for bosons with	Tuna	Amount	unt
Source (include date of receipt for nonoraria)	lype	Current Year to Filing	Preceding Year
XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
-1	Director's Fee	\$400	\$3,200
XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	<b>\$1,000</b>
Harris County, Texas Public Schools	Spouse Salary	NA	NA
THE SHIPLEY GROUP	SALARY	56,175.03	149, 800.08
MERCURY RADIO ARTS	WRITING		30,000
THE SHIPLEY GROWP	OTHER INCOME		10,000
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HERSONAL ACCT.	WFG INVESTMENTS	OPTION MODERATE	אורה של הוא		DC, Examples: Simon & Schuster	SP, SP Mega Corp. Stock	For an ownership interest in a privately-held business that is not publicly tracked, state the name of the business, the nature of its activities, and its geographic location in Block A.  Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in personal checking or savings accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held with your spouse (JT), in the optional column on the far left.  For a detailed discussion of Schedule III requirements, please refer to the Instruction booklet.	For rental or other real property held for investment, provide a complete address.		Provide complete names of stocks and mutual funds (do not use ticker symbols).  For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans) in which you have the power, even if not exercised, to select the spe-	Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	Asset and/or Income Source
~	~	<b>X</b>	><	×	Indefinite		None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$5,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000		income, the value should be "None."	If an asset was sold during the reporting year and is included only because it generated	Indicate value of asset at close of reporting year. If you use a valuation method other than fair market value, please specify the	BLOCK B Value of Asset
×	×	*	<b>X</b>	×	Royalties	×	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST  Other Type of Income (Specify: e.g., Partnership Income or Farm Income	ne)	asset generated no income during the reporting period.	plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the	Check all columns that apply. For relirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k)	BLOCK C  Type of Income
			× ×	×	X	X	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$1,000,000 \$1 - \$2,500,000 \$1 - \$2,500,000 \$1,000,001 - \$5,000,000 \$1 - \$2,500 \$201 - \$1,000 \$1,001 - \$2,500 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$2,501 - \$5,000 \$2,501 - \$5,000 \$2,501 - \$15,000 \$15,001 - \$100,000 \$100,001 - \$1,000,000 \$100,001 - \$1,000,000 \$2,001 - \$1,000,000 \$2,000 - \$5,000,000 \$2,000 - \$5,000,000	Current rear	arned or genera		For retirement accounts that do not allow you to choose specific investments <u>or</u> that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column.	BLOCK D  Amount of Income

#### SCHEDULE III — LIABILITIES

Name CHRIS STEWART

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ture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the previous calendar year exceeded \$10,000. owed during the reporting period. Exclude: Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furni-Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount

				SP, DC, JT
		ESCI	Example: First Bank of Wilmington, DE	Creditor
		 A5 09	May 1998	Date Liability Incurred mo/year
		CO-SIGN ON SON(SEEN SHUMET) STUDENT LOAN	Mortgage on 123 Main Street, Dover, DE	Type of Liability
		 ×	,	\$10,001— \$15,000
				\$15,001— \$50,000
	 -			\$50;001— \$100;000
			×	\$100,001— \$250,000 D
				\$250,000 m \$250,000 m
				\$500,001— \$1,000,000
<u> </u>			,	\$1,000,001— o \$5,000,000
		 -		\$5,000,001— \$25,000,000 <b>エ</b>
<b> </b>			ŀ	\$25,000,001— \$50,000,000
			-	Over

#### SCHEDULE IV — POSITIONS

Report all positions, compensated or uncompensated, held on or before the date of filing during the current calendar year and in the two prior years as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

**Exclude:** Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as a political party or campaign organization):

and positions solely of an nonorary nature.	nature.
Position	Name of Organization
TRESIDE AT	THE SHIPLEY GROUP - A CONSULTING COMPANY LOCATED IN FARMINGTON CHAN

### SCHEDULE V — AGREEMENTS

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Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

# SCHEDULE VI -- COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. **Exclude:** Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

Source (Name and Address)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting services
MERCURY RADIO MATS	FREELANCE WEITING (2011)