

UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT—FINANCIAL DISCLOSURE STATEMENT

FORM B—For Use By Candidates and New Employees

WHO MUST FILE AND WHEN: A candidate for the U.S. House of Representatives must file a Financial Disclosure Statement each year. The candidate's first report is due within 30 days of becoming a candidate (by raising or spending more than \$5,000) or by May 15th of the calendar year in which he or she becomes a candidate, whichever is later, but, in any event, at least 30 days before the primary or general election. A clear postmark is accepted as the filing date.

A covered new employee of the Legislative Branch must file a Financial Disclosure Statement within 30 days of beginning the job.

A \$200 late filing fee shall be assessed against any individual who files more than 30 days after the due date of a report or amendment (or the date of any extension). Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file the attached report may be subject to civil penalties and criminal sanctions. See Section 104 of the Ethics in Government Act (5 U.S.C. app. 4 §§ 101–111) and 18 U.S.C. § 1001.

REPORTING PERIOD: Information must be reported for the preceding calendar year and current year to date of filing. Sources of compensation over \$5,000 and positions must be reported for the two prior years (24 months).

Information regarding assets and liabilities must be current as of a date which is within 30 days of this form's filing date.

WHERE TO OBTAIN ASSISTANCE: Committee on Ethics, U.S. House of Representatives, 508 Ford House Office Building, Washington, DC 20515. Telephone: (202) 225–7103.

Additional forms and instructions may be obtained from the Committee.

Requests for extensions of time for filing must be in writing and addressed to the Committee (or the relevant legislative branch agency). An extension request must be **received** (not postmarked) no later than the due date. The maximum extension is 90 days, but no extension can be granted allowing a candidate to file less than 30 days before an election.

BEFORE FILING: Complete all parts. Please type or print neatly using blue or black ink. Do not use pencil. Attach additional sheets if necessary, indicating the section being continued. Type or print your name at the top of each page filed.

ANSWER EACH QUESTION ON THE PRELIMINARY INFORMATION PAGE and attach the appropriate schedule for each "Yes" response. Sign and date the form.

Remove this cover page before filing.

**Separate pages and file only those required.
Do not file blank schedules.**

RETURN COMPLETED STATEMENT TO:
**The Clerk, U.S. House of Representatives
Legislative Resource Center
B-106 Cannon House Office Building
Washington, DC 20515-6612**

Filing Instructions for Candidates: File a signed original and two photocopies of your report, including all attachments.

Filing Instructions for Employees: File a signed original and one photocopy of your report, including all attachments.

UNITED STATES HOUSE OF REPRESENTATIVES
ETHICS IN GOVERNMENT ACT
FINANCIAL DISCLOSURE STATEMENT — FORM B

Please provide the following information. Your address and signature WILL NOT be made available to the public.

Stewart Charles Mills, III

(Print Full Name)

(Daytime Telephone)

(Complete Address – Office or Home)

Filer Status



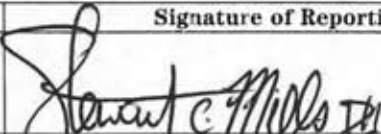
Candidate



New Employee

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The attached Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available for review by the public and will be reviewed by the Committee on Ethics or its designee. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file the attached report may be subject to civil penalties and criminal sanctions. See Section 104 of the Ethics in Government Act (5 U.S.C. app. 4 §§ 101-111) and 18 U.S.C. § 1001.

Certification	Signature of Reporting Individual	Date
I CERTIFY that the statements I have made on the attached Financial Disclosure Statement and all attached schedules are true, complete, and correct to the best of my knowledge and belief.		20 Aug 13

Candidates must file a signed original and two photocopies thereof. Employees must file a signed original and one photocopy thereof.

*****FOR OFFICIAL USE ONLY – DO NOT WRITE BELOW*****

Certification	Signature of Certifying Official	Date
It is my opinion, based on the information contained in this Financial Disclosure Statement, that the reporting individual is in compliance with Title I of the Ethics in Government Act (5 U.S.C. app. 4 §§ 101-111).		

**UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT**

FORM B
For use by candidates and new employees

Period covered: January 1, 2012 - July 31, 2013

Name: Stewart Charles Mills, III

Daytime Telephone:

(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Candidate for the House of Representatives	State: MN District: 8	Date of Election: November 4, 2014	Check if Amendment <input type="checkbox"/>	A \$200 penalty shall be assessed against any individual who files more than 30 days late.
	<input type="checkbox"/> New officer or employee	Employing Office: _____			

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? If yes, complete and attach Schedule I.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IV. 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 <input checked="" type="checkbox"/> No <input type="checkbox"/>
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? If yes, complete and attach Schedule II.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	V. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule V.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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 <input type="checkbox"/> No <input checked="" type="checkbox"/>

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
EXEMPTION —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 <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE I – EARNED INCOME (INCLUDING HONORARIA)

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 exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

	Source (include date of receipt for honoraria)	Type	Amount	
			Current Year to Filing	Preceding Year
<i>Examples:</i>	XYZ Corporation, Houston, TX	Salary	\$6,300	\$28,450
	First Bank & Trust, Houston, TX	Director's Fee	\$400	\$3,200
	XYZ Trade Association, Chicago, IL (Rec'd December 2)	Honorarium	0	\$1,000
	Harris County, Texas Public Schools	Spouse Salary	NA	NA
	Fleet Wholesale Supply Co., Inc., Brainerd, MN	Salary	196,707	568,329

SCHEDULE II – ASSETS AND “UNEARNED” INCOME

Continuation Sheet (if needed)

Name **Stewart Charles Mills, III**

Page **6** of **12**

SP, JT, DC	BLOCK A Asset and/or Income Source	BLOCK B Value of Asset														BLOCK C Type of Income								BLOCK D Amount of Income																								
		A	B	C	D	E	F	G	H	I	J	K	L	M									Current Year												Preceding Year													
		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 – \$25,000,000	\$25,000,001 – \$50,000,000	Over \$50,000,000	Spouse/DC Asset over \$1,000,000*	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income--(Specify: e.g., Partnership Income or Farm Income)	None	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	Spouse/DC Income over \$1,000,000*	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII
																									I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII		I	II	III	IV	V	VI	VII	VIII	IX	X	XI
	The Stewart C. Mills, III 2012 Irrevocable Trust																																															
	- Demand Note Receivable, Crow Wing Oil Company							X									X											X									X											
	The Stewart C. Mills, Jr. Grandchildren's Trust Agreement																																															
	* Closely Held businesses operating as "Mills Fleet																																															
	Farm" Retail. Wisconsin, Minnesota, Iowa and North Dakota																																															
	- Mills Supply, Inc.								X												S-Corp Dist.	X															X											
	- Lively Auto Company						X														S-Corp Dist.	X															X											
	- Demand Note Receivable, Crow Wing Oil Company				X												X									X											X											
	The Stewart C. Mills, IV Irrevocable Trust																																															
	- Demand Note Receivable, Crow Wing Oil Company						X										X									X																X						
	The Jade Dalen Mills Irrevocable Trust																																															
	- Demand Note Receivable, Crow Wing Oil Company				X												X									X																X						

SCHEDULE III – LIABILITIES

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 owed during the reporting period. **Exclude:** Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniture, 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.

SP, DC, JT	Creditor	Date Liability Incurred mo/year	Type of Liability	Amount of Liability												
				A \$10,001— \$15,000	B \$15,001— \$50,000	C \$50,001— \$100,000	D \$100,001— \$250,000	E \$250,001— \$500,000	F \$500,001— \$1,000,000	G \$1,000,001— \$5,000,000	H \$5,000,001— \$25,000,000	I \$25,000,001— \$50,000,000	J Over \$50,000,000	K Spouse/DC Liability over \$1,000,000		
	<i>Example:</i> First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				X									
	The Stewart C. Mills Jr., Irrevocable Trust															
	- Stewart C. Mills, III Irrevocable Trust	April 2003	Stock Purchase Promissory Note								X					
	- Lively Auto Company	April 2009	Demand Note Payable									X				
	Stewart C. Mills, III Irrevocable Trust															
	- Crow Wing Oil Company	Sept 2007	Demand Note Payable								X					

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, partner, proprietor, representative, employee, or consultant of any corporation, company, 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 honorary nature.

Position	Name of Organization
Vice President	Fleet Wholesale Supply Co., Inc.
Vice President	Mills Fleet Farm, Inc.
Vice President	Mills Properties, Inc.
Vice President	Mills Trucking, LLC
Vice President	Crow Wing Oil Company

Use additional sheets if more space is required.

SCHEDULE III – LIABILITIES

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 owed during the reporting period. **Exclude:** Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniture, 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.

SP, DC, JT	Creditor	Date Liability Incurred mo/year	Type of Liability	Amount of Liability											
				A \$10,001— \$15,000	B \$15,001— \$50,000	C \$50,001— \$100,000	D \$100,001— \$250,000	E \$250,001— \$500,000	F \$500,001— \$1,000,000	G \$1,000,001— \$5,000,000	H \$5,000,001— \$25,000,000	I \$25,000,001— \$50,000,000	J Over \$50,000,000	K Spouse/DC Liability over \$1,000,000	
	<i>Example:</i> First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				X								
	Stewart C. Mills, Jr. Irrevocable Insurance Trust														
	-Crow Wing Oil Company	Jan 2000	Demand Note Payable					X							
	Stewart C. Mills Jr., Grandchildren's Trust Agreement														
	- Stewart C. Mills, Jr.	May 2012	Stock Purchase Promissory Note						X						

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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 honorary nature.

Position	Name of Organization
Vice President	Fleet and Farm of Alexandria, Inc.
Vice President	Fleet Wholesale Supply of Fergus Falls, Inc.
Vice President	Fleet and Farm of Green Bay, Inc.
Vice President	Fleet and Farm of Manitowoc, Inc.
Vice President	Fleet and Farm of Menomonie, Inc.

Use additional sheets if more space is required.

SCHEDULE III — LIABILITIES

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	<i>Example:</i> First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				X									

SCHEDULE IV — POSITIONS

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Position	Name of Organization
Vice President	Fleet and Farm of Plymouth, Inc.
Vice President	Fleet and Farm of Waupaca, Inc.
Vice President	Fleet and Farm Supply Company of West Bend, Inc.
Vice President	Mills Supply, Inc.
Vice President	Mills E-Commerce Enterprises, Inc.

Use additional sheets if more space is required.

SCHEDULE III – LIABILITIES

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 owed during the reporting period. **Exclude:** Any mortgage on your personal residence (unless there is rental income); loans secured by automobiles, household furniture, 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.

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	<i>Example:</i> First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				X									

SCHEDULE IV – POSITIONS

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Position	Name of Organization
Vice President	Lively Auto Company
Director/Secretary/Vice President	Mills Automotive Group Reinsurance Limited
President	Mills Financial Services, Inc.
Plan Administrator	Mills Supply, Inc. Deferred Compensation Plan
Trustee/Administrator/Fiduciary	Mills Companies Employee Welfare Benefit Plan Trust

Use additional sheets if more space is required.

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	<i>Example:</i> First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				X									

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Position	Name of Organization
Trustee	Fleet Wholesale Supply Profit Sharing 401(K) Plan and Trust
Trustee	Mills Auto Group Profit Sharing 401(K) Plan and Trust
Plan Administrator	Mills Companies Premium Payment Plan
Plan Administrator	Mills Companies Cafeteria Plan
Plan Administrator	Fleet Wholesale Supply Co., Inc. Deferred Compensation Plan

Use additional sheets if more space is required.

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	<i>Example:</i> First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main Street, Dover, DE				X									

SCHEDULE IV – POSITIONS

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Position	Name of Organization
Director	Minnesota Fraternal Order of Police Foundation