

**UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT**

Form A
For use by Members, officers, and employees

Name: Steve Daines Daytime Telephone: _____

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED
MC
(Office Use Only)

Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: <u>MT</u>	District: <u>AL</u>	<input type="checkbox"/> Officer or Employee	Employing Office: _____
Report Type	<input checked="" type="checkbox"/> Annual (May 15, 2013)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Termination Date: _____	

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

<p>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.</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>	<p>VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI.</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
<p>II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>	<p>VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)? If yes, complete and attach Schedule VII.</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
<p>III. 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 III.</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>	<p>VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>
<p>IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> <u>N/A</u></p>	<p>IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>
<p>V. 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 V.</p>	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p>	<p>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</p>	

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

IP0—Did you purchase any shares that were allocated as a part of an Initial Public Offering?

Yes No

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 dependent child?

Yes No

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 No

SCHEDULE I - EARNED INCOME

Name

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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 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	Type	Amount
Keene State	Approved Teaching Fee	\$6,000
State of Maryland	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
Rightnow Technologies, Inc	Salary	110,100
Oracle Corporation	Salary	158,682

SCHEDULE III — ASSETS AND “UNEARNED” INCOME

Continuation Sheet (if needed)

Name

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SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset													BLOCK C Type of Income							BLOCK D Amount of Income												BLOCK E Transaction												
		A	B	C	D	E	F	G	H	I	J	K	L	M	NONE	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED/BLIND TRUST	TAX-DEFERRED	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)	I	II	III	IV	V	VI	VII	VIII	IX	X	XI		XII											
	ST Commercial Real Estate																																													
	Belgrade MT																																													
	ST Residential Lease Estate																																													
	Belgrade MT																																													
	ST Residential Lease Estate																																													
	Belgrade MT																																													
	ST Residential Lease Estate																																													
	Belgrade MT																																													
	SP Commercial Real Estate																																													
	West Union IA																																													
	STIFel IRA (Geotekn 7)																																													
	STIFed Account (See attached)																																													
	STIFed Account (See attached)																																													
	OT General Loan																																													
	ST Bridger Technology																																													
	ST American Bank Savings																																													
	ST Oracle stock option																																													

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SCHEDULE V— LIABILITIES

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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 year. **Members:** Members are required to report all liabilities secured by real property including mortgages on their personal residence. **Exclude:** Any mortgage on your personal residence (unless it is rented out or you are a Member); 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 preceding calendar year exceeded \$10,000. *This column is for liabilities held solely by your spouse or dependent child.

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	
Example:	First Bank of Wilmington, DE	May 1998	Mortgage on 123 Main St., Dover, DE				X								
JT	Yellowstone Bank Bozeman, MT	10/12	Mortgage						X						

SCHEDULE VI— GIFTS

Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year. **Exclude:** Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. **Note:** The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Ethics)	\$375

Use additional sheets if more space is required.

SCHEDULE VIII—POSITIONS

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Report all positions, compensated or uncompensated, held during the current calendar year 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 political parties and campaign organizations); and positions solely of an honorary nature.

Position	Name of Organization
<i>Mewser</i>	<i>Generis Partners</i>

SCHEDULE IX—AGREEMENTS

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
<i>2/12</i>	<i>Orade Corporation</i>	<i>CORRA - ended 2/1/13</i>

IRA

<u>Asset Type</u>	<u>Description</u>	<u>Type</u>	<u>Symbol</u>	<u>Quantity</u>	<u>Market Pri</u>	<u>Market Value</u>
Cash Equivalent	Insured Bank Program	Cash	9999435	14,218.53	\$1.00	\$14,218.53
Mutual Fund	American High Income Cl F2	Cash	AHIFX	3,725.18	\$11.66	\$43,435.55
Mutual Fund	American U S Government Securities Cl F2	Cash	GVTFX	5,732.43	\$14.17	\$81,228.55
Mutual Fund	Artisan Mid Cap Value Investor Cl	Cash	ARTQX	1,774.50	\$24.25	\$43,031.65
Mutual Fund	Europacific Growth Cl F2	Cash	AEPFX	1,451.93	\$44.13	\$64,073.67
Mutual Fund	Growth Fund Of America Cl F2	Cash	GFFFX	3,463.63	\$38.48	\$133,280.48
Mutual Fund	Harbor Bond Instl Cl	Cash	HABDX	8,497.29	\$12.61	\$107,150.79
Mutual Fund	Heartland Value Plus Instl Cl	Cash	HNVIX	1,327.25	\$31.57	\$41,901.35
Mutual Fund	Highmark Geneva Mid Cap Growth Fiduciary	Cash	PNMFX	1,642.27	\$26.23	\$43,076.64
Mutual Fund	Mfs Intl Growth Cl I	Cash	MQGIX	2,169.09	\$29.60	\$64,205.12
Mutual Fund	Pioneer Oak Ridge Small Cap Growth Cl Y	Cash	ORIYX	1,322.06	\$33.18	\$43,865.95
Mutual Fund	Vanguard Short Term Federal Admiral Cl	Cash	VSGDX	3,765.71	\$10.80	\$40,669.62
Mutual Fund	Washington Mutual Investors Cl F2	Cash	WMFFX	3,842.14	\$35.34	\$135,781.09
Total Value of Search Results						\$855,919.04

SAVINGS

<u>Asset Type</u>	<u>Description</u>	<u>Symbol</u>	<u>Quantity</u>	<u>Market Pri</u>	<u>Market Value</u>
Cash Equivalents	Insured Bank Program	9999435	4,390.22	\$1.00	\$4,390.22
Mutual Fund	Artisan Mid Cap Value Investor Cl	ARTQX	753.467	\$24.25	\$18,271.57
Mutual Fund	Dws Managed Municipal Bond Cl S	SCMBX	2,383.03	\$9.58	\$22,829.43
Mutual Fund	Dws Strategic High Yield Tax Free Cl S	SHYTX	1,242.04	\$13.18	\$16,370.02
Mutual Fund	Europacific Growth Cl F2	AEPFX	574.408	\$44.13	\$25,348.63
Mutual Fund	Growth Fund Of America Cl F2	GFFFX	1,370.27	\$38.48	\$52,728.07
Mutual Fund	Heartland Value Plus Instl Cl	HNVIX	525.084	\$31.57	\$16,576.90
Mutual Fund	Highmark Geneva Mid Cap Growth Fiduciary	PNMFX	649.709	\$26.23	\$17,041.87
Mutual Fund	Mfs Intl Growth Cl I	MQGIX	858.13	\$29.60	\$25,400.65
Mutual Fund	Pioneer Oak Ridge Small Cap Growth Cl Y	ORIYX	523.029	\$33.18	\$17,354.10
Mutual Fund	Tax Exempt Bond America Cl F2	TEAFX	3,450.60	\$13.24	\$45,686.00
Mutual Fund	Thornburg Limited Term Municipal Cl I	LTMIX	1,542.17	\$14.73	\$22,716.15
Mutual Fund	Washington Mutual Investors Cl F2	WMFFX	1,520.02	\$35.34	<u>\$53,717.37</u>
Total Value of Search Results					\$338,430.98

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