

HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS (LONG FORM)

<p>NAME (Last, First, Middle): Say, Calvin Kwai Yen</p> <p>STATE POSITION HELD: State Representative - Speaker of the House</p> <p>DEPT/DIVISION or BOARD/COMMISSION: House of Representatives</p> <p>TERM OF OFFICE (Begin/End): 11/3/10 / 11/6/12</p>	<p>Date Received:</p> <p>12 FEB 14 P2:44</p> <p>STATE OF HAWAII STATE ETHICS COMMISSION</p>
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FOR EACH ITEM, EXCEPT ITEM 9, DISCLOSE INTERESTS OF FILER, SPOUSE, AND DEPENDENT CHILDREN.
USE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the spouse and filer.

ITEM 1: INCOME FOR SERVICES RENDERED FOR PRECEDING CALENDAR YEAR

List the source (the term "source" also includes any state or other government agencies) and amount of all income of \$1,000 or more received during the preceding calendar year, for services rendered, and the nature of the services rendered.

F, SP, DC, JT	NAME AND ADDRESS OF SOURCE OF INCOME	AMOUNT	SERVICES RENDERED
F	House of Representatives State Capitol, Room 431 Honolulu, Hawaii 96813	E	Legislator
F	Kotake Shokai, Ltd. 1812 Kalani Street Honolulu, Hawaii 96819	C	President
F	Warabeya USA dba Tokyo Bento Nichiyo 2859 Pa'a Street, 2nd Floor Honolulu, Hawaii 96818 (See Attachment A for additional information)	C	Secretary

Check here if entry is None

Check here if additional sheets are attached

ITEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List the amount and identity of every ownership or beneficial interest held during the disclosure period in any business in or outside of the State if the interest has a value of \$5,000 or more or is equal to 10% or more of the ownership of the business.

F, SP, DC, JT	BUSINESS NAME AND ADDRESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES
F	Kotake Shokai, Ltd. 1812 Kalani Street Honolulu, Hawaii 96819 (See Attachment B for additional information)	Importer Wholesaler	Shares	B

Check here if entry is None

Check here if additional sheets are attached

ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List any ownership or beneficial interests in businesses transferred during the disclosure period and the date of transfer.

F, SP, DC, JT	OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD	DATE OF TRANSFER

Check here if entry is None

Check here if additional sheets are attached

ITEM 4: CREDITORS

List the name of each creditor to whom the value of \$3,000 or more was owed during the disclosure period and the original amount and amount outstanding. Exclude debts from retail installment transactions for the purchase of consumer goods.

F, SP, DC, JT	NAME OF CREDITOR	ORIGINAL AMOUNT OWED	AMOUNT OUTSTANDING
JT	Bank of Hawaii 111 South King Street Honolulu, Hawaii 96813	G	G
SP	Central Pacific Bank P.O. Box 3590 Honolulu, Hawaii 96811	G	G

Check here if entry is None

Check here if additional sheets are attached

ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS

List every officership, directorship, trusteeship, or other fiduciary relationship held during the disclosure period in any business or organization, the term of office, and the annual compensation.

F, SP, DC, JT	NAME AND ADDRESS OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION
F	Kotake Shokai, Ltd. 1812 Kalani Street Honolulu, Hawaii 96819	President	2000 - Present	C
F	Warabeya, USA dba Tokyo Bento Nichiyo 2859 Pa'a Street, 2nd Floor Honolulu, Hawaii 96818	Secretary	2002 - Present	C

Check here if entry is None

Check here if additional sheets are attached

ITEM 6: INTERESTS IN REAL PROPERTY HELD, EXCLUDING PERSONAL RESIDENCE(S)

List interests in real property in or outside of the State held during the disclosure period, if the interest has a value of \$10,000 or more. Real property that is your personal residence or the personal residence of your spouse or dependent children need not be listed.

F, SP, DC, JT	STREET ADDRESS	TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	VALUE
SP	215 North King Street, Apt. 1801 Honolulu, Hawaii 96817	150080010175	H

Check here if entry is None

Check here if additional sheets are attached

ITEM 7: INTERESTS IN REAL PROPERTY ACQUIRED, EXCLUDING PERSONAL RESIDENCE(S)

List interests in real property in or outside of the State acquired during the disclosure period, if the interest has a value of \$10,000 or more. Real property that is your personal residence or the personal residence of your spouse or dependent children need not be listed.

F, SP, DC, JT	STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	AMOUNT & NATURE OF CONSIDERATION PAID	NAME OF PERSON RECEIVING THE CONSIDERATION

Check here if entry is None

Check here if additional sheets are attached

ITEM 8: INTERESTS IN REAL PROPERTY TRANSFERRED, EXCLUDING PERSONAL RESIDENCE(S)

List interests in real property in or outside of the State transferred during the disclosure period, if the interest has a value of \$10,000 or more. Real property that was your personal residence or the personal residence of your spouse or dependent children need not be listed.

F, SP, DC, JT	STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	AMOUNT & NATURE OF CONSIDERATION RECEIVED	NAME OF PERSON FURNISHING THE CONSIDERATION

Check here if entry is None

Check here if additional sheets are attached

ITEM 9: CLIENTS PERSONALLY REPRESENTED BEFORE STATE AGENCIES

List the names of clients personally represented by you before state agencies, except in ministerial matters, for a fee or compensation during the disclosure period, excluding clients represented before courts.

NAME OF CLIENT	NAME OF STATE AGENCY

Check here if entry is None Check here if additional sheets are attached

ITEM 10: CREDITOR INTERESTS IN INSOLVENT BUSINESSES

List the amount and identity of every creditor interest in insolvent businesses, held during the disclosure period, if the interest has a value of \$5,000 or more.

F, SP, DC, JT	NAME AND ADDRESS OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE

Check here if entry is None Check here if additional sheets are attached

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.

Calvin K. Ay *2/15/12*
 SIGNATURE DATE

ATTACHMENT A
ITEM 1: INCOME FOR SERVICES RENDERED
FOR PRECEDING CALENDAR YEAR
ADDITIONAL INFORMATION

F, SP, DC, JT	NAME AND ADDRESS OF SOURCE OF INCOME	AMOUNT	SERVICES RENDERED
SP	Lanakila School 717 North School Street Honolulu, Hawaii 96817	E	Teacher
SP	Cora Say (Rental of 215 North King Street, Apt. 1801)	C	Real Property Rental

ATTACHMENT B

**ITEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES
ADDITIONAL INFORMATION**

F, SP, DC, JT	BUSINESS NAME AND ADDRESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES
JT	Bernstein Tax-Managed International Portfolio Sanford C. Bernstein & Co., LLC 1345 Avenue of the Americas New York, New York 10105 (Note: All of the following are held in mutual funds or investment portfolios managed by the above.)	Mutual Fund	Shares	D
JT	Bernstein Emerging Markets Portfolio	Mutual Fund	Shares	C
JT	Bernstein Diversified Municipal Portfolio	Mutual Fund	Shares	H
JT	Alliance Bernstein Bond Fund Municipal Bond Inflation Strategy Class 1	Mutual Fund	Shares	D
JT	Alliance Bernstein Small/Mid Cap Value Fund Advisor	Mutual Fund	Shares	C
JT	Alliance Bernstein Small/Mid Cap Growth Advisor	Mutual Fund	Shares	C
JT	Tax Aware Overlay A Portfolio Class 1	Mutual Fund	Shares	D
JT	Tax Aware Overlay B Portfolio Class 1	Mutual Fund	Shares	F
JT	Apple Inc.	Information Technology	Shares	B