HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

	DISCLOSURE OF TH	ANION	- 11411 - 11	<u>'</u>	515. LONG I	
FILER Onishi Last Nam		Rich First N				H. K. _{M.I.}
FOR ST	ATE EMPLOYEES		FOR STA	TE	BOARD/COMMISSIO	ON MEMBERS
State I	Legislature					
Departme	ent		Board/Con	nmis	ssion Name	
House	of Representatives					
Division			BEGIN END			
3rd Dis	strict Representative		Term of O	TICE	(mm/dd/yyyy)	
Position						
	DR EACH ITEM, EXCEPT ITEM 9, DISCLO ABBREVIATIONS: "F" for filer, "SP" for spous					
	ITEM 1: INCOME FOR SERV urce and amount of all income of \$1,000 or m EARNED FROM YOUR STATE POSITION), a	ore received dur	ing the preced	ding o	calendar year for services r	
F,SP, DC,JT	NAME AND ADDRESS OF SOURCE OF INC	OME	AMOUNT		SERVICES RENDERED	
F	State of Hawaii, Legislature		E		Legislator	
SP	State of Hawaii, Hawaii Commun		F		Vice Chancellor	
DC	State of Hawaii, Hilo Union Scho	OI	В		Tutor	
Che	ck here if entry is None			c	check here if additional	sheets are attached
State if the LIST ALL S see instruc	ITEM 2: OWNERSHIF mount and identity of every ownership or bene interest has a value of \$5,000 or more or is of STOCKS, MUTUAL FUNDS OR OTHER NOT tions available at http://hawaii.gov/ethics.	ficial interest held equal to 10% or r	d during the di	sclos ners	sure period in any business ship of the business. YOU A	ARE REQUIRED TO 000 OR MORE. Please
F,SP, DC,JT	BUSINESS NAME AND ADDRESS	NATURE OF B	USINESS	N/	ATURE OF INTEREST	VALUE OR NO. OF SHARES
	See attached sheet.		Г.		Check here if additional	
	ck here if entry is None		[✓		HECK HEIE II AUGITIONALS	Sileets 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 TR	ANSFERRED DURING THIS	DISC	CLOSURE PERIOD		DATE OF TRANSFER
✓ Che	ck here if entry is None			Check here if additiona	ıl shee	ts are attached
	me of each creditor to whom the value of \$3,0 tstanding. Exclude debts from retail installmen				origina	l amount and
F,SP, DC,JT	NAME OF CREDITOR			ORIGINAL AMOUNT OWED	AMO	UNT STANDING
JT	First Hawaiian Bank			H	Е	STAINDING
JT	HFS Federal Credit Union - Equit	y Loan Account			Е	
			_		<u>. </u>	
Che	ck here if entry is None		ш_	Check here if additiona	Il shee	ts are attached
List every o	ITEM 5: OFFICER officership, directorship, trusteeship, or other fun, the term of office, and the annual compens	SHIPS, DIRECTORSHIPS iduciary relationship held duation.			y busin	ess or
F,SP, DC,JT	NAME AND ADDRESS OF BUSINESS	TITLE HELD	TE	ERM OF OFFICE	ANNU	JAL PENSATION
,	See attached sheet.					
Che	ck here if entry is None		<u> </u>	Check here if additiona	l shee	ets are attached

ITEM 6: INTERESTS IN REAL PROPERTY HELD, EXCLUDING PERSONAL RESIDENCE(S)
List interests in real property in outside of the State held during the disclosure period, if the interest has a value of \$10,000 or more. Real

- 05	· · · · · · · · · · · · · · · · · · ·			V.14.D	
F,SP, DC,JT	STREET ADDRESS	TAX MAP KEY KEY NUMBER I		X MAP	VALUE
	See attached sheet.				
Che	ck here if entry is None	v	Check here	e if additional s	sheets are attached
	ITEM 7: INTERESTS IN REAL PROPERTY ACQ				
List interes Real prope	ts in real property in or outside of the State acquired during rty that is your personal residence or the personal residence	the disclosure poe of your spouse	eriod, if the inte or dependent	erest has a value children need no	of \$10,000 or more. t be listed.
F,SP, DC,JT	STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	AMOUNT & NA		NAME OF PER THE CONSIDE	SON RECEIVING RATION
- /-	,		-		
Cloha	ali bara if antini ia Nama		7 Chaolahan	if a delitional a	haata ana attachad
✓ Che	ck here if entry is None		Check here	e if additional s	sheets are attached
	ITEM 8: INTERESTS IN REAL PROPERTY TRANS	FERRED, EXC	LUDING PER	SONAL RESIDI	ENCE(S)
	ts in real property in or outside of the State transferred durinty that was your personal residence or the personal residence.				
Tteal prope	ity that was your personal residence of the personal reside	since of your spor	ase of depende	T crinaren need	not be listed.
F,SP, DC,JT	STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	AMOUNT & NAT CONSIDERATION		NAME OF PER THE CONSIDE	SON FURNISHING RATION
20,0.	THE THE ME I	001101210111		00.10.02	
✓ Che	ck here if entry is None		Check here	e if additional s	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		ME OF STATE AGENCY		
✓ Check here if entry is None		Che	ck here if additional she	eets are attached
ITEM 10: CREDITOR List the amount and identity of every creditor interest in ins \$5,000 or more.		RESTS IN INSOLVENT BU businesses, held during the		rest has a value of
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			ets are attached	
FILER				
Richard H. K. Onishi			1/29/20)14
Type Name of Filer (First, M.I., Last)(Signature require	d on th	is line if you are filing a pape	er form) Date (m/d	/уууу)
CERTIFICATION: By checking this box or signing your name on this form, you signify and affirm that				

CERTIFICATION: By checking this box or signing your name on this form, you signify and affirm that you are the person whose name appears as the "Filer" above and the information contained in the form is true, correct and complete to the best of your knowledge and belief. You further certify that you understand that there are statutory penalties for failing to report the information required by Hawaii law.

Hawaii State Ethics Commission Long Form Disclosure of Financial Interest

Richard H.K. Onishi State Legislature, House of Representatives

ITEM 2: OWNERSHIP OR BENEFICIAL INTEREST IN BUSINESSES

F, SP,		NATURE OF	NATURE OF	VALUE
JT	BUSINESS NAME AND ADDRESS	NATURE OF BUSINESS	NATURE OF INTEREST	OR NO. OF SHARES
JT	Hawaiian Electric Industries	Electric Utility	Stockholder	Е
JT	Wells Fargo Money Market Account	Investment Brokeage	Shareholder	D
JT	Hawaii Tax Free Trust	Mutual Fund	Shareholder	С
JT	Hawaii State DBF Revenue Bond	Government	Stockholder	D
JT	RCM Global Technology Fund	Mutual Fund	Stockholder	В
JT	Aquila Hawaiian T/F Trust	Mutual Fund	Stockholder	В
JT	Prudential Invt Port Growth Fund	Mutual Fund	Stockholder	В
SP	Puna Plantation, LTD	Real Estate	Stockholder	I
	50 E Puainako St. Hilo, HI			
SP	KTA Super Stores	Retail Supermarket	Stockholder	G
	50 E Puainako St. Hilo, HI			
SP	TMT Investments	Real Estate	Partner	I
	2040 Ainaola Place Hilo, HI			

ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS

F, SP, DC,			TERM OF	ANNUAL COMPENS
JT	BUSINESS NAME AND ADDRESS	TITLE HELD	OFFICE	ATION
F	Honpa Hongwanji Hilo Betsuin	President	2012 - 2013	None
	398 Kinoole St. Hilo, HI			
F	Honpa Hongwanji Mission of Hawaii	Director	2012 - 2013	None
	1727 Pali Hwy. Honolulu, HI			
F	Hawaii Island Adult Care	Vice President	2005 - Present	None
	34 Rainbow Dr. Hilo, HI			
F	Hawaii County Employees FCU	Director	2010 - Present	None
	131 Puuhonu Way Hilo, HI			
F	Hilo High School Foundation	Director	2009 - Present	None
	556 Waianuenue Av. Hilo, Hi			
SP	Puna Plantation, LTD	Director	1992 - Present	A
	50 E Puainako St. Hilo, HI			

SP	KTA Super Stores	Director	1992 - Present	В
	50 E Puainako St. Hilo, HI			
SP	Crime Stoppers in Hilo	Director	2007 - Present	None
	394 Kapiolani St. Hilo, HI			
SP	Hawaii Island United Way	Director	2009 - Present	None
	142 Kinoole St., Suite A Hilo, HI			

ITEM 6: INTEREST IN REAL PROPERTY HELD, EXCLUDING PERSONAL RESIDENCE

F, SP,			
DC, JT	STREET ADDRESS	TAX MAP KEY	VALUE
	106 Kaikuono Street	3-2-5-031-020-0000	G
	Hilo, HI 96720		
SP	1673 Kilauea Avenue	3-3-2-038-066-0000	G
	Hilo, HI 96720		
SP	300 Ponahawai Street	3-2-3012-017-0000	F
	Hilo, HI 96720		
SP	956 Kumukoa Street	3-2-4-066-002-0000	G
	Hilo, HI 96720		