

HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

FILER		
McEnerney	Michael	T.
Last Name	First Name	M.I.
FOR STATE EMPLOYEES		FOR STATE BOARD/COMMISSION MEMBERS
Department		University of Hawaii Board of Regents Board/Commission Name
Division		07/01/2015 06/30/2020 BEGIN END <i>Term of Office (mm/dd/yyyy)</i>
Position		

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 and amount of all income of \$1,000 or more received during the preceding calendar year for services rendered (INCLUDING INCOME EARNED FROM YOUR STATE POSITION), and the nature of the services rendered.

F,SP, DC,JT	NAME OF EMPLOYER / OTHER SOURCE(S) OF INCOME	AMOUNT	SERVICES RENDERED
F S	McEnerney Shimabukuro Okazaki & Fujita CPAs AAC	F	President, CPA
	McEnerney Shimabukuro Okazaki & Fujita CPAs AAC	D	IT Director, accounting services

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. YOU ARE REQUIRED TO LIST ALL STOCKS, MUTUAL FUNDS OR OTHER NON-RETIREMENT INVESTMENT INTERESTS VALUED AT \$5,000 OR MORE. Please see instructions available at <http://ethics.hawaii.gov>.

F,SP, DC,JT	NAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES
	see attached schedule			

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
F	200 Shares Apple Stock	03/11/2014

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
	none		

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 OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION
F	McEnerney Shimabukuro	President, director	ongoing	F
F	Okazaki & Fujita CPAs AAC	Trustee	ongoing	NONE
F	2004 Revocable Trust of David W. Doyle	Treasurer	ongoing	NONE
	Collaborative Divorce Hawaii Practice Group			

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
	NONE		

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
	NONE		

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
	NONE		

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
David W. Doyle deceased Paul Mullen Ganley, Esq. Nancy Emerson	Hawaii Department of Taxation Hawaii Department of Taxation Hawaii Department of Taxation

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 OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE
	NONE		STATE OF HAWAII STATE ETHICS COMMISSION	'15 JUL 27 AM 1:42

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

FILER

Michael T. McEnerney *Michael T. McEnerney* 7/27/2015
 Type Name of Filer (First, M.I., Last) (Signature required on this line if you are filing a paper form) Date (m/d/yyyy)

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.

McEnerney Michael T

University of Hawaii Board of Regents
07/01/2015 06/30/2020

ITEM 2: OWNERSHIP OR BENEFICIAL INTEREST IN BUSINESSES

F,SP DC, JT	NAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO OF SHARES
F	Advantage Bank Deposit	cash holding	money market account	31640.54 shares
F	King Digital	public company	equity	200 shares
F	Clicksoftware Technol	public company	equity	600 shares
F	IBM	public company	equity	120 shares
F	Microsoft	public company	equity	500 shares
F	Apple	public company	equity	150 shares
F	Illinois Tool Works	public company	equity	200 shares
F	Johnson Controls Inc	public company	equity	400 shares
F	Berkshire Hathaway B	public company	equity	200 shares
F	ONE OK Inc	public company	equity	100 shares
F	Bankamerica	public company	equity	600 shares
F	LKQ Corp	public company	equity	400 shares
F	Rigel Pharmaceuticals	public company	equity	1000 shares
F	Ubiquiti Networks	public company	equity	200 shares
F	Oaktree Cap Group	public company	equity	200 shares
F	Carlyle Group	publically traded ltd ptrship	equity	350 units
F	McEnerney, Shimabukuro, Okazaki & Fujita CPAs AAC	accountancy corporation private company	equity	4,130 shares
JT	Advantage Bank Deposit	cash holding	money market account	1129.53 shares
JT	Mainkind Corp MMF	public company	equity	730 shares
JT	Growth Fund of America	public company	equity	4109.56 shares