HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

FILER					
Scheuer	Jona	athan		L	
Last Name	First I	Name		M.I.	
FOR STATE EMPLOYEES		FOR STATE BOARD/COMMISSION MEMBERS			
			se Commission		
Department					
Бераннен		Board/Commission Name 06/30/2020			
5				0/2020	
Division		BEGIN END Term of Office (mm/dd/yyyy)			
		70111101011	nee (mm, aa, yyyy)		
Position					
FOR EACH ITEM, EXCEPT ITEM 9 USE ABBREVIATIONS: "F" for filer, "SP"					
ITEM 1: INCOME FO	R SERVICES RENDER	ED FOR PRE	CEDING CALENDAR YEA	R	
List the source and amount of all income of \$1 INCOME EARNED FROM YOUR STATE POS				rendered (INCLUDING	
F,SP, DC,JT NAME OF EMPLOYER / OTHER SO			SERVICES RENDERED		
	(-)	AMOUNT			
Check here if entry is None			Check here if additional	I sheets are attached	
		<u> </u>		i sileets are attached	
List the amount and identity of every ownership	NERSHIP OR BENEFIC p or beneficial interest hel			ss in or outside of the	
State if the interest has a value of \$5,000 or m	ore or is equal to 10% or	more of the ow	nership of the business. YOU	ARE REQUIRED TO	
LIST ALL STOCKS, MUTUAL FUNDS OR OT Please see instructions available at					

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					
√ Che	ck here if entry is None		Check here if additiona	al 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		
		_				
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		
Che	ck here if entry is None	Γ.	Check here if additions	al 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.

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F,SP, DC,JT	STREET ADDRESS	TAX MAP KEY NUMBER (IF TAX KEY NUMBER EXISTS)	(MAP VALUE
√ Che	ck here if entry is None	Check here	if additional sheets are attached
List interes Real prope	ITEM 7: INTERESTS IN REAL PROPERTY ACQ ts in real property in or outside of the State acquired during rty that is your personal residence or the personal residence	the disclosure period, if the inter	rest has a value of \$10,000 or more.
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
✓ Che	ck here if entry is None	Check here	if additional sheets are attached
	ITEM 8: INTERESTS IN REAL PROPERTY TRANS ts in real property in or outside of the State transferred duri rty that was your personal residence or the personal residence.	ng the disclosure period, if the in	terest has a value of \$10,000 or more.
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
√ Che	ck 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		NAN	ME OF STATE AGENCY		
Che	ck here if entry is None		✓ Che	ck here if additional s	heets are attached
	ITEM 10: CREDITOR I	NTE	RESTS IN INSOLVENT BU	JSINESSES	
List the am \$5,000 or r	ount and identity of every creditor interest in inso	lvent	businesses, held during the	disclosure period, if the i	nterest has a value of
	noie.				
F,SP, DC,JT	NAME OF BUSINESS		NATURE OF BUSINESS	NATURE OF INTEREST	VALUE
Cho	ck here if entry is None		☐ Cha	 ck here if additional s	hoote are etteched
✓ Che	ck here if entry is none		Cne	ck here if additional s	neets are attached
FILER					
Jonathan L Scheuer				05/29	/2016
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.

Check all that apply. - State Board/Commission Member

Department

Division

State Employee Position

State Board or Commission Name Land Use Commission

Term of Office Start Jul 14, 2014

Term of Office End Jun 30, 2020

Category 1: Income for services rendered for preceding calendar year Yes, I have items

START Item #1 Who holds interest? Filer

Item #1 Name of Employer/ Other source of income Department of Hawaiian Home Lands

Item #1 Compensation received D : At least \$25,000 but less than \$50,000

Item #1 Description of services rendered Consulting, water policy

START Item #2 Who holds interest? Filer

Item #2 Name of Employer/ Other source of income Department of the Interior, National Park Service

Item #2 Compensation received E: At least \$50,000 but less than \$100,000

Item #2 Description of services rendered Consulting, water policy

START Item #3 Who holds interest? Filer

Item #3 Name of Employer/ Other source of income Department of the Interior, United States Geological Survey

Item #3 Compensation received C : At least \$10,000 but less than \$25,000

Item #3 Description of services rendered Organization and facilitation of a climate science workshop

START Item #4 Who holds interest? Filer

Item #4 Name of Employer/ Other source of income Hawai`i Alliance for Progressive Action

Item #4 Compensation received B: At least \$1,000 but less than \$10,000

Item #4 Description of services rendered Strategic Planning facilitation

START Item #5 Who holds interest? Filer

Item #5 Name of Employer/ Other source of income University of Hawaii, William S Richardson School of Law

Item #5 Compensation received B: At least \$1,000 but less than \$10,000

Item #5 Description of services rendered Lecturer

Category 2: Ownership or Beneficial Interests in Businesses None

START Item #1 Who holds interest?

Item #1 Legal name of business

Item #1 Nature of business

Item #1 Nature of interest

Item #1 Value of interest

Item #1 Number of Shares

START Item #2 Who holds interest?

Item #2 Legal name of business

Item #2 Nature of business

Item #2 Nature of interest

Item #2 Value of interest

Item #2 Number of Shares

START Item #3 Who holds interest?

Item #3 Legal name of business

Item #3 Nature of business

Item #3 Nature of interest

Item #3 Value of interest

Item #3 Number of Shares

START Item #4 Who holds interest?

Item #4 Legal name of business

Item #4 Nature of business

Item #4 Nature of interest

Item #4 Value of interest

Item #4 Number of Shares

START Item #5 Who holds interest?

Item #5 Legal name of business

Item #5 Nature of business

Item #5 Nature of interest

Item #5 Value of interest

Item #5 Number of Shares

Category 3: Transfer of Ownership or Beneficial Interests in Businesses None

START Item #1 Who holds interest?

Item #1 Ownership or beneficial interest transferred during this disclosure period

Item #1 Date of transfer

START Item #2 Who holds interest?

Item #2 Ownership or beneficial interest transferred during this disclosure period

Item #2 Date of transfer

START Item #3 Who holds interest?

Item #3 Ownership or beneficial interest transferred during this disclosure period

Item #3 Date of transfer

START Item #4 Who holds interest?

Item #4 Ownership or beneficial interest transferred during this disclosure period

Item #4 Date of transfer

START Item #5 Who holds interest?

Item #5 Ownership or beneficial interest transferred during this disclosure period

Item #5 Date of transfer

Category 4: Creditors Yes, I have items

START Item #1 Who holds interest? Joint

Item #1 Legal name of creditor Chase

Item #1 Original amount owed I: At least \$500,000 but less than \$750,000

Item #1 Amount outstanding I : At least \$500,000 but less than \$750,000

START Item #2 Who holds interest? Joint

Item #2 Legal name of creditor Hawai`i State Federal Credit Union

Item #2 Original amount owed F: At least \$100,000 but less than \$150,000

Item #2 Amount outstanding F : At least \$100,000 but less than \$150,000

START Item #3 Who holds interest? Filer

Item #3 Legal name of creditor Navient

Item #3 Original amount owed D : At least \$25,000 but less than \$50,000

Item #3 Amount outstanding C : At least \$10,000 but less than \$25,000

START Item #4 Who holds interest?

Item #4 Legal name of creditor

Item #4 Original amount owed

Item #4 Amount outstanding

START Item #5 Who holds interest?

Item #5 Legal name of creditor

Item #5 Original amount owed

Item #5 Amount outstanding

START Item #1 Who holds interest? Filer

Item #1 Legal name of entity Hawaiian Islands Land Trust

Item #1 Title held Director

Item #1 Term of Office To January 31, 2019

Item #1 Annual compensation

START Item #2 Who holds interest?

Item #2 Legal name of entity

Item #2 Title held

Item #2 Term of Office

Item #2 Annual compensation

START Item #3 Who holds interest?

Item #3 Legal name of entity

Item #3 Title held

Item #3 Term of Office

Item #3 Annual compensation

START Item #4 Who holds interest?

Item #4 Legal name of entity

Item #4 Title held

Item #4 Term of Office

Item #4 Annual compensation

START Item #5 Who holds interest?

Item #5 Legal name of entity

Item #5 Title held

Item #5 Term of Office

Item #5 Annual compensation

Category 6: Interests in Real Property Held, excluding Personal Residence(s) None

START Item #1 Who holds interest?

Item #1 Street address

Item #1 Tax Map Kev

Item #1 Value

START Item #2 Who holds interest?

Item #2 Street address

Item #2 Tax Map Key

Item #2 Value

START Item #3 Who holds interest?

Item #3 Street address

Item #3 Tax Map Key

Item #3 Value

START Item #4 Who holds interest?

Item #4 Street address

Item #4 Tax Map Key

Item #4 Value

START Item #5 Who holds interest?

Item #5 Street address

Item #5 Tax Map Key

Item #5 Value

START Item #1 Who holds interest?

Item #1 Street address

Item #1 Tax Map Key

Item #1 Amount of consideration paid

Item #1 Nature of consideration paid

Item #1 Legal name of person or entity receiving the consideration

START Item #2 Who holds interest?

Item #2 Street address

Item #2 Tax Map Key

Item #2 Amount of consideration paid

Item #2 Nature of consideration paid

Item #2 Legal name of person or entity receiving the consideration

START Item #3 Who holds interest?

Item #3 Street address

Item #3 Tax Map Key

Item #3 Amount of consideration paid

Item #3 Nature of consideration paid

Item #3 Legal name of person or entity receiving the consideration

START Item #4 Who holds interest?

Item #4 Street address

Item #4 Tax Map Key

Item #4 Amount of consideration paid

Item #4 Nature of consideration paid

Item #4 Legal name of person or entity receiving the consideration

START Item #5 Who holds interest?

Item #5 Street address

Item #5 Tax Map Key

Item #5 Amount of consideration paid

Item #5 Nature of consideration paid

Item #5 Legal name of person or entity receiving the consideration

Category 8: Interests in Real Property Transferred, excluding Personal Residence(s) None

START Item #1 Who holds interest?

Item #1 Street address

Item #1 Tax Map Key

Item #1 Amount of consideration received

Item #1 Nature of consideration received

Item #1 Legal name of person or entity furnishing the consideration

START Item #2 Who holds interest?

Item #2 Street address

Item #2 Tax Map Key

Item #2 Amount of consideration received

Item #2 Nature of consideration received

Item #2 Legal name of person or entity furnishing the consideration

START Item #3 Who holds interest?

Item #3 Street address

Item #3 Tax Map Key

Item #3 Amount of consideration received

Item #3 Nature of consideration received

Item #3 Legal name of person or entity furnishing the consideration

START Item #4 Who holds interest?

Item #4 Street address

Item #4 Tax Map Key

Item #4 Amount of consideration received

Item #4 Nature of consideration received

Item #4 Legal name of person or entity furnishing the consideration

START Item #5 Who holds interest?

Item #5 Street address

Item #5 Tax Map Key

Item #5 Amount of consideration received

Item #5 Nature of consideration received

Item #5 Legal name of person or entity furnishing the consideration

Category 9: Clients Personally Represented before State Agencies Yes, I have items

START Item #1 Legal name of client National Park Service

Item #1 Name of State Agency Commission on Water Resource Management

START Item #2 Legal name of client Department of Hawaiian Home Lands

Item #2 Name of State Agency Commission on Water Resource Management

START Item #3 Legal name of client

Item #3 Name of State Agency

START Item #4 Legal name of client

Item #4 Name of State Agency

START Item #5 Legal name of client

Item #5 Name of State Agency

Category 10: Creditor Interests in Insolvent Businesses None

START Item #1 Who holds interest?

Item #1 Legal name of entity

Item #1 Nature of business

Item #1 Nature of interest

Item #1 Value

START Item #2 Who holds interest?

Item #2 Legal name of entity

Item #2 Nature of business

Item #2 Nature of interest

Item #2 Value

START Item #3 Who holds interest?

Item #3 Legal name of entity

Item #3 Nature of business

Item #3 Nature of interest

Item #3 Value

START Item #4 Who holds interest?

Item #4 Legal name of entity

Item #4 Nature of business

Item #4 Nature of interest

Item #4 Value

START Item #5 Who holds interest?

Item #5 Legal name of entity

Item #5 Nature of business

Item #5 Nature of interest

Item #5 Value

Upload your additional information Addendum to Financial Disclosure form for Jonathan 2016.docx

By checking this box, 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. - I sign and affirm

Filer Name Jonathan L Scheuer

Addendum to Financial Disclosure form for Jonathan L. Scheuer

Filed May 29, 2016

Additional Item 1

SP Group 70 International, Inc. F Employee