HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

| Michael | Doub | | | | |
|--|--|--|--|--|--|
| | Paul | | | | |
| First Name | M.I. | | | | |
| FOR STATE BOARD | COMMISSION MEMBERS | | | | |
| | Natural Energy Laboratory of Hawaii Board/Commission Name 10/01/2015 10/01/2017 | | | | |
| | END (yyyy) | | | | |
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| ERESTS OF FILER, SPOUSE, AN r dependent children, and "JT" for jo | | | | | |
| NDERED FOR PRECEDING CAL yed during the preceding calendar ye ture of the services rendered. | ENDAR YEAR ear for services rendered (INCLUDING | | | | |
| ME AMOUNT SERVICE | S RENDERED | | | | |
| | | | | | |
| ✓ Check here | e 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 . | | | | | |
| E OF BUSINESS NATURE OF | VALUE OR NO. OF SHARES | | | | |
| Chaok have | e if additional sheets are attached | | | | |
| | Natural Energy Li Board/Commission Nar 10/01/2015 BEGIN Term of Office (mm/dd/) ERESTS OF FILER, SPOUSE, AN r dependent children, and "JT" for jo NDERED FOR PRECEDING CAL red during the preceding calendar ye rure of the services rendered. ME AMOUNT SERVICE REFICIAL INTERESTS IN BUSINI est held during the disclosure period 0% or more of the ownership of the b MENT INVESTMENT INTERESTS E OF BUSINESS NATURE OF | | | | |

ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

| List arry ov | mership or beneficial interests in businesses | transferred during the disclosi | ле р | benoù and the date of traf | isiei. | |
|----------------|--|--|----------|--|----------|---------------------|
| F,SP, DC,JT | OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD | | | | | DATE OF TRANSFER |
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| ✓ Che | ck here if entry is None | | <u> </u> | Check here if additiona | al shee | ets are attached |
| List the na | me of each creditor to whom the value of \$3,0 tstanding. Exclude debts from retail installme | ITEM 4: CREDITORS 000 or more was owed during nt transactions for the purchase | the of | disclosure period and the foonsumer goods. | origina | I amount and |
| F,SP, DC,JT | NAME OF CREDITOR | | | ORIGINAL AMOUNT OWED | AMO | UNT STANDING |
| 20,01 | THE STATE OF STREET | | | | | 0.7.1.12.1.10 |
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| ✓ Che | ck here if entry is None | | | Check here if addition | al shee | ets are attached |
| | | SHIPS, DIRECTORSHIPS, | | | | |
| organization | officership, directorship, trusteeship, or other on, the term of office, and the annual compens | fiduciary relationship held duri sation. | ng tl | he disclosure period in an | ıy busir | ness or |
| F,SP, DC,JT | NAME OF BUSINESS | TITLE HELD | TE | RM OF OFFICE | ANNI | JAL PENSATION |
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| Cho | ck here if entry is None | Г | \neg | Check here if addition: | al chad | te 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.

| property tri | at is your personal residence of the personal residence of | your spouse or depe | ndent ciliure | in need not be it | 316G. |
|----------------------------|---|------------------------------------|-----------------|----------------------------|--------------------------|
| F,SP, DC,JT | STREET ADDRESS | TAX MAP KEY NUM KEY NUMBER EXIS | | (MAP | VALUE |
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| Che | ck here if entry is None | | | | heets are attached |
| List interes Real prope | ITEM 7: INTERESTS IN REAL PROPERTY ACC its in real property in or outside of the State acquired during irty that is your personal residence or the personal residence | the disclosure perio | d, 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 & NATUR CONSIDERATION F | | NAME OF PER THE CONSIDE | SON RECEIVING RATION |
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| ✓ Che | ck here if entry is None | | Check here | if additional s | sheets are attached |
| | ITEM 8: INTERESTS IN REAL PROPERTY TRANS ts in real property in or outside of the State transferred dur try that was your personal residence or the personal residence. | ing the disclosure pe | riod, if the in | terest has a valu | ue of \$10,000 or more. |
| F,SP, DC,JT | STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS) | AMOUNT & NATUR CONSIDERATION F | | NAME OF PER THE CONSIDE | SON FURNISHING RATION |
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| ✓ Che | ck here if entry is None | | Check here | if additional s | heets 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 | OF CLIENT NAME OF STATE AGENCY | | | | |
|---|--------------------------------|--|--------------------|----------------------------|-------------------|
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| ✓ Che | ck here if entry is None | | Ch | eck here if additional sh | eets 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 |
| ✓ Che | ck here if entry is None | | ☐ ch | eck here if additional sho | eets are attached |
| Uneck here it additional sheets are attached | | | | | |
| FILER | | | | | |
| MICHAEL Paul ELDRED 06/01/2016 | | | | 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 Natural Energy Laboratory of Hawaii

Term of Office Start Oct 01, 2015

Term of Office End Oct 01, 2017

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 Makai Ocean Engineering

Item #1 Compensation received F: At least \$100,000 but less than \$150,000

Item #1 Description of services rendered Salary engineer

START Item #2 Who holds interest?

Item #2 Name of Employer/ Other source of income

Item #2 Compensation received

Item #2 Description of services rendered

START Item #3 Who holds interest?

Item #3 Name of Employer/ Other source of income

Item #3 Compensation received

Item #3 Description of services rendered

START Item #4 Who holds interest?

Item #4 Name of Employer/ Other source of income

Item #4 Compensation received

Item #4 Description of services rendered

START Item #5 Who holds interest?

Item #5 Name of Employer/ Other source of income

Item #5 Compensation received

Item #5 Description of services rendered

Category 2: Ownership or Beneficial Interests in Businesses Yes, I have items

START Item #1 Who holds interest? Filer

Item #1 Legal name of business Makai Ocean Engineering, Inc.

Item #1 Nature of business engineering consulting firm

Item #1 Nature of interest 2% ownership

Item #1 Value of interest E : At least \$50,000 but less than \$100,000

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

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 None

START Item #1 Who holds interest? Filer

Item #1 Legal name of creditor

Item #1 Original amount owed

Item #1 Amount outstanding

START Item #2 Who holds interest?

Item #2 Legal name of creditor

Item #2 Original amount owed

Item #2 Amount outstanding

START Item #3 Who holds interest?

Item #3 Legal name of creditor

Item #3 Original amount owed

Item #3 Amount outstanding

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

Category 5: Officerships, Directorships, Trusteeships None

START Item #1 Who holds interest?

Item #1 Legal name of entity

Item #1 Title held

Item #1 Term of Office

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

START Item #1 Who holds interest? Joint

Item #1 Street address 73-1551 heneli pl

KAILUA kona, HI 96740

United States

Item #1 Tax Map Key 3730240920000

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

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

Category 7: Interests in Real Property Acquired, 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 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

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 None

START Item #1 Legal name of client

Item #1 Name of State Agency

START Item #2 Legal name of client

Item #2 Name of State Agency

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

By checking this box, you signify and affirm that you are the person whose name appears as the Filerabove 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 MICHAEL Paul ELDRED