HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

FILER					
Ruderman Rus		Russ	sell		Е
Last Nan	Last Name First		Name		M.I.
FOR STATE EMPLOYEES			FOR STAT	TE BOARD/COMMISSI	ON MEMBERS
l egisla	ature				
Legislature Department			Board/Commission Name		
Senate			Board, Commission Hamo		
Division			BEGIN	END	
	Senator			fice (mm/dd/yyyy)	
Position	Seriator				
POSITION					
	OR 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 mEARNED FROM YOUR STATE POSITION), a	ore received duri	ng the precedi	ing calendar year for services	
F,SP, DC,JT	NAME OF EMPLOYER / OTHER SOURCE(S)) OF INCOME	AMOUNT	SERVICES RENDERED	
Check here if entry is None			√	Check here if additional	sheets are attached
	ITEM 2: OWNERSHIF				
	nount and identity of every ownership or bene interest has a value of \$5,000 or more or is				
LIST ALL	STOCKS, MUTUAL FUNDS OR OTHER NO	N-RETIREMENT			
Please see	e 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					
	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						
organizatio	on, the term of office, and the annual compens		ng the disclosure period in an	y business of		
F,SP, DC,JT	NAME OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION		
Cha	ck here if entry is None		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.

property tri	at is your personal residence of the personal residence of	your spouse or dependent childre	en need not be listed.
F,SP, DC,JT	STREET ADDRESS	TAX MAP KEY NUMBER (IF TAX KEY NUMBER EXISTS)	X MAP VALUE
Che	ck here if entry is None	✓ Check here	if additional sheets are attached
	ITEM 7: INTERESTS IN REAL PROPERTY ACC		
List interes Real prope	ts in real property in or outside of the State acquired during trty that is your personal residence or the personal residence	the disclosure period, if the inte	rest has a value of \$10,000 or more. 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
✓ 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 dur rty that was your personal residence or the personal residence.	ing the disclosure period, if the ir	iterest 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		NAME OF STATE AGENCY			
√ Che	ck here if entry is None		Che	eck here if additional she	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
✓ Check here if entry is None					
FILER					
Russell E Ruderman 01/03/2016				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 Employee

Department Legislature

Division Senate

State Employee Position State Senator

State Board or Commission Name

Term of Office Start

Term of Office End

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 State of Hawaii

Item #1 Compensation received E : At least \$50,000 but less than \$100,000

Item #1 Description of services rendered Legislator

START Item #2 Who holds interest? Filer

Item #2 Name of Employer/ Other source of income Island Naturals Market, Inc.

Item #2 Compensation received K : At least \$1,000,000 or more

Item #2 Description of services rendered Owner and Manager

START Item #3 Who holds interest? Filer

Item #3 Name of Employer/ Other source of income Island Naturals Properties LLC

Item #3 Compensation received B: At least \$1,000 but less than \$10,000

Item #3 Description of services rendered Real estate rental

START Item #4 Who holds interest? Joint

Item #4 Name of Employer/ Other source of income Melodia LLC

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

Item #4 Description of services rendered Real estate rental

START Item #5 Who holds interest? Spouse

Item #5 Name of Employer/ Other source of income Island Naturals Market, Inc.

Item #5 Compensation received C : At least \$10,000 but less than \$25,000

Item #5 Description of services rendered Manager

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 Island Naturals Market, Inc

Item #1 Nature of business Natural food retail

Item #1 Nature of interest Shareholder

Item #1 Value of interest K: At least \$1,000,000 or more

Item #1 Number of Shares

START Item #2 Who holds interest? Filer

Item #2 Legal name of business Island Naturals Pahoa, Inc.

Item #2 Nature of business Natural food retail

Item #2 Nature of interest Shareholder

Item #2 Value of interest K: At least \$1,000,000 or more

Item #2 Number of Shares

START Item #3 Who holds interest? Filer

Item #3 Legal name of business Island Naturals Kona, Inc.

Item #3 Nature of business Natural food retail

Item #3 Nature of interest Shareholder

Item #3 Value of interest K: At least \$1,000,000 or more

Item #3 Number of Shares

START Item #4 Who holds interest? Filer

Item #4 Legal name of business Island Naturals Properties, LLC

Item #4 Nature of business Real Estate

Item #4 Nature of interest Member

Item #4 Value of interest H : At least \$250,000 but less than \$500,000

Item #4 Number of Shares

START Item #5 Who holds interest? Joint

Item #5 Legal name of business Melodia LLC

Item #5 Nature of business Real Estate

Item #5 Nature of interest Members

Item #5 Value of interest H: At least \$250,000 but less than \$500,000

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 Yes, I have items

START Item #1 Who holds interest? Filer

Item #1 Legal name of creditor Bank of Hawaii

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

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

START Item #2 Who holds interest? Filer

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 Yes, I have items

START Item #1 Who holds interest? Filer

Item #1 Legal name of entity Island Naturals Market, Inc.

Item #1 Title held President

Item #1 Term of Office 1998- no end

Item #1 Annual compensation A : Less than \$1,000 $\,$

START Item #2 Who holds interest? Filer

Item #2 Legal name of entity Island Naturals Pahoa, Inc

Item #2 Title held President

Item #2 Term of Office 2006- no end

Item #2 Annual compensation A: Less than \$1,000

START Item #3 Who holds interest? Filer

Item #3 Legal name of entity Island Naturals Kona, Inc

Item #3 Title held President

Item #3 Term of Office 2008- no end

Item #3 Annual compensation A : Less than \$1,000

START Item #4 Who holds interest? Filer

Item #4 Legal name of entity Island Naturals Properties, LLC

Item #4 Title held Member

Item #4 Term of Office 2011 - no end

Item #4 Annual compensation A: Less than \$1,000

START Item #5 Who holds interest? Joint

Item #5 Legal name of entity Melodia LLC

Item #5 Title held Members

Item #5 Term of Office 2015

Item #5 Annual compensation A: Less than \$1,000

START Item #1 Who holds interest? Filer

Item #1 Street address 15-1870 Akeakamai Loop

Pahoa, HI 96778 United States

Item #1 Tax Map Key 3-1-5-11-01

Item #1 Value K : At least \$1,000,000 or more START Item #2 Who holds interest? Joint Item #2 Street address 15-1039 Amau st

Keaau, HI 96749 United States

Item #2 Tax Map Key 3-1-5-062-059

Item #2 Value H : At least \$250,000 but less than \$500,000

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

START I Tem #5 Legal name of Ch

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 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 Russell E Ruderman