# HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

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Last Name First		lame	M.I.				
FOR STATE EMPLOYEES		FOR STATE BOARD/COMMISSION MEMBERS					
Legislature Department		Board/Commission Name					
House							
Division		BEGIN END					
Representative		Term of Office (mm/dd/yyyy)					
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.							
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: 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 <a href="http://ethics.hawaii.gov">http://ethics.hawaii.gov</a> .							
BUSINESS	NATURE OF BU	JSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES			
entry is None			Check here if additional	shoots are attached			
	EM, EXCEPT ITEM 9, DISCLATIONS: "F" for filer, "SP" for spous ITEM 1: INCOME FOR SERV ount of all income of \$1,000 or mOM YOUR STATE POSITION), at EMPLOYER / OTHER SOURCE(SEMPLOYER / OTHER SOURCE(SEMPLOYER / OTHER SOURCE) at a value of \$5,000 or more or is JTUAL FUNDS OR OTHER NOTE at a valiable at http://ethics.hawaii.	EM, EXCEPT ITEM 9, DISCLOSE INTEREST ONS: "F" for filer, "SP" for spouse, "DC" for deper ITEM 1: INCOME FOR SERVICES RENDERION on YOUR STATE POSITION), and the nature of S1,000 or more received during the state of S2,000 or more received during the state of S4,000 or more received during the state of S4,000 or more received during the state of S5,000 or more or is equal to 10% or not a value of \$5,000 or more or is equal to 10% or not use of S5,000	BEGIN Term of Off.  BEGIN Term of Off.  TEM, EXCEPT ITEM 9, DISCLOSE INTERESTS OF FILER, IONS: "F" for filer, "SP" for spouse, "DC" for dependent children, ITEM 1: INCOME FOR SERVICES RENDERED FOR PREC JOUNT of all income of \$1,000 or more received during the precedit OM YOUR STATE POSITION), and the nature of the services re  EMPLOYER / OTHER SOURCE(S) OF INCOME  AMOUNT  ITEM 2: OWNERSHIP OR BENEFICIAL INTERES' entity of every ownership or beneficial interest held during the dis a value of \$5,000 or more or is equal to 10% or more of the own JTUAL FUNDS OR OTHER NON-RETIREMENT INVESTMENT available at http://ethics.hawaii.gov.  BUSINESS  NATURE OF BUSINESS	First Name  FOR STATE BOARD/COMMISSION BOARD/COMMISSION BEGIN END Term of Office (mm/dd/yyyy)  EM, EXCEPT ITEM 9, DISCLOSE INTERESTS OF FILER, SPOUSE, AND DEPENDER ONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the strength of the services rendered.  EMPLOYER / OTHER SOURCE(S) OF INCOME  AMOUNT  SERVICES RENDERED  AMOUNT  SERVICES RENDERED  TIEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES Intity of every ownership or beneficial interest held during the disclosure period in any business a value of \$5,000 or more or is equal to 10% or more of the ownership of the business. YOU JTUAL FUNDS OR OTHER NON-RETIREMENT INVESTMENT INTERESTS VALUED AT \$5 available at <a href="http://ethics.hawaii.gov">http://ethics.hawaii.gov</a> .  NATURE OF BUSINESS  NATURE OF INTEREST			

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.

List arry ov		transferred during the disclos	ourc p	criod and the date of train				
F,SP, DC,JT	OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD				DATE OF TRANSFER			
Che	eck here if entry is None		<b>√</b> (	Check here if additiona	I 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			
- /-				-				
<b>√</b> Che	eck here if entry is None	]		Check here if additiona	I sheets are attached			
List every organization	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	TE	RM OF OFFICE	ANNUAL COMPENSATION			
,								
<b>√</b> Che	eck here if entry is None	[		Check here if additiona	I 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			
	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	g the disclosure period, if the inte ce of your spouse or dependent o	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 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			
√ 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.

	- T				
NAME OF CLIENT	NAN	ME OF STATE AGENCY			
✓ Check here if entry is None			heck here if a	additional she	eets are attached
ITEM 10: CREDITOR	INTER	RESTS IN INSOLVENT I	BUSINESSES	<b>.</b>	
List the amount and identity of every creditor interest in in: \$5,000 or more.	solvent	businesses, held during th	e disclosure pe	eriod, if the inte	erest has a value of
F,SP, DC,JT NAME OF BUSINESS		NATURE OF BUSINESS	NATURE C	F INTEREST	VALUE
✓ Check here if entry is None     Check here if additional sheets are attached					
FILER					
MARK J HASHEM				01/30/2	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)					/уууу)

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.

## Filer Name mark j hashem

Check all that apply. - State Employee

**Department** Legislature

**Division** House

State Employee Position Representative

**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 Legislative Salary

START Item #2 Who holds interest? Spouse

Item #2 Name of Employer/ Other source of income Tamura's Fine Wine

Item #2 Compensation received D: At least \$25,000 but less than \$50,000

Item #2 Description of services rendered Salary

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 FIDELITY LATIN AMER

Item #1 Nature of business MUTUAL FUND

Item #1 Nature of interest STOCK

Item #1 Value of interest C : At least \$10,000 but less than \$25,000

Item #1 Number of Shares

START Item #2 Who holds interest? Filer

Item #2 Legal name of business QQQ

Item #2 Nature of business

Item #2 Nature of interest MUTUAL FUND

Item #2 Value of interest D : At least \$25,000 but less than \$50,000  $\,$ 

Item #2 Number of Shares

START Item #3 Who holds interest?

Item #3 Legal name of business JANUS OVERSEAS FUND

Item #3 Nature of business MUTUAL FUND

Item #3 Nature of interest STOCK

Item #3 Value of interest D : At least \$25,000 but less than \$50,000

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? Filer

Item #1 Ownership or beneficial interest transferred during this disclosure period FREEPORT MCMORAN - STOCK

AMERICAN CAPITAL LTD - STOCK

EATON CORP - STOCK

SHOUTHER COPPER CORP - STOCK

Item #1 Date of transfer Aug 05, 2015

START Item #2 Who holds interest? Filer

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?

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

# 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 Key

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

# 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 MARK J HASHEM