HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

| FILER Onishi | | Rich | ard | | H. K. | |
|-----------------|---|---------------------|------------------|------------------------------------|---------------------------|--|
| | | laru Name | | П. К. М.І. | | |
| FOR ST | ATE EMPLOYEES | | FOR STAT | FOR STATE BOARD/COMMISSION MEMBERS | | |
| | Legislature | | TOROTAL | L BOARD/OOMMIOOR | on members | |
| Departm | C | | Board/Com | mission Name | | |
| House | e of Representatives | | | | | |
| Division | | | BEGIN | END | | |
| 3rd Di | strict Representative | | Term of Off | fice (mm/dd/yyyy) | | |
| Position | | | | | | |
| | DR EACH ITEM, EXCEPT ITEM 9, DISCLO ABBREVIATIONS: "F" for filer, "SP" for spouse | | | | | |
| List the so | ITEM 1: INCOME FOR SERVI urce and amount of all income of \$1,000 or me EARNED FROM YOUR STATE POSITION), a | ore received dur | ing the precedi | ing calendar year for services r | | |
| F,SP, DC,JT | NAME OF EMPLOYER / OTHER SOURCE(S) | OF INCOME | AMOUNT | SERVICES RENDERED | | |
| F | State of Hawaii, Legislature | | E | Legislator | | |
| SP | State of Hawaii, Hawaii Communi | ity College | F | Vice Chancellor | | |
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| | | | | | | |
| Che | ck here if entry is None | | · | Check here if additional | sheets are attached | |
| | ITEM 2: OWNERSHIP | OR BENEFIC | IAL INTERES | TS IN BUSINESSES | | |
| | nount and identity of every ownership or beneft interest has a value of \$5,000 or more or is e | icial interest hele | d during the dis | sclosure period in any business | | |
| LIST ALL | STOCKS, MUTUAL FUNDS OR OTHER NON | I-RETIREMENT | | | | |
| _ | e instructions available at http://ethics.hawaii.g | <u>IOV</u> . | | | VALUE OF NO | |
| F,SP, DC,JT | NAME OF BUSINESS | NATURE OF B | USINESS | NATURE OF INTEREST | VALUE OR NO. OF SHARES | |
| | See attached sheet. | | | | | |
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| Che | eck here if entry is None | | \checkmark | 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 | | | | | |
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| Cha | als have if anims in Name | | _ | Check here if additiona | |
| V Che | ck here if entry is None | L | | Check here if additiona | ai sneets are attached |
| | | ITEM 4: CREDITORS | | | |
| | me of each creditor to whom the value of \$3,0 tstanding. Exclude debts from retail installment | | | | original amount and |
| | | | | 1 | AMOUNT |
| F,SP, DC,JT | NAME OF CREDITOR | | | ORIGINAL AMOUNT OWED | AMOUNT OUTSTANDING |
| JT | First Hawaiian Bank | | | Н | E |
| JT | HFS Federal Credit Union - Equit | | | | E |
| JT | CENLAR (Central Loan Administ | ration & Reporting | | H | Н |
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| | alahana Mandunda Nama | | _ | Observations if a delitions | -1 -111 -1 |
| Cne | ck here if entry is None | L | | Check here if additiona | ai sneets are attached |
| Link account | | SHIPS, DIRECTORSHIPS | | | hda.a.a. |
| | officership, directorship, trusteeship, or other to the term of office, and the annual compension, the term of office, and the annual compension. | | ring | the disclosure period in an | y business or |
| F,SP, | , | | Т | | ANNUAL |
| DC,JT | NAME OF BUSINESS | TITLE HELD | Т | ERM OF OFFICE | COMPENSATION |
| | See attached sheet. | | | | |
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| Che | ck here if entry is None | | ✓ | Check here if additiona | al sneets 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 |
| · | See attached sheet. | , | |
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| Che | ck here if entry is None | ✓ Check here | e if additional sheets are attached |
| List interes Real prope | ITEM 7: INTERESTS IN REAL PROPERTY ACC 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 inte | 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 |
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| ✓ Che | ck here if entry is None | Check here | e 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 in | 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 |
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| ✓ Che | ck here if entry is None | Check here | e 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 | | ME OF STATE AGENCY | | |
|---|------|----------------------|----------------------|-------------------------------|
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| | NTFF | RESTS IN INSOLVENT B | | |
| List the amount and identity of every creditor interest in insol \$5,000 or more. | | | | ne interest has a value of |
| F,SP, DC,JT NAME OF BUSINESS | | NATURE OF BUSINESS | NATURE OF INTER | EST VALUE |
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| Check here if entry is None | | Che | eck here if addition | al sheets are attached |
| | | Ch | | al sheets are attached 9/2016 |

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.

Hawaii State Ethics Commission Long Form Disclosure of Financial Interest

Richard H.K. Onishi State Legislature, House of Representatives

ITEM 2: OWNERSHIP OR BENEFICIAL INTEREST IN BUSINESSES

| F, SP, DC, JT | BUSINESS NAME AND ADDRESS | NATURE OF BUSINESS | NATURE OF INTEREST | VALUE OR NO. OF SHARES |
|------------------------|----------------------------------|-----------------------|-----------------------|------------------------------|
| JT | Hawaiian Electric Industries | Electric Utility | Stockholder | Е |
| JT | Wells Fargo Money Market Account | Investment Brokeage | Shareholder | D |
| JT | Hawaii Tax Free Trust | Mutual Fund | Shareholder | С |
| JT | Hawaii State DBF Revenue Bond | Government | Stockholder | D |
| JT | RCM Global Technology Fund | Mutual Fund | Stockholder | В |
| JT | Aquila Hawaiian T/F Trust | Mutual Fund | Stockholder | В |
| JT | Prudential Invt Port Growth Fund | Mutual Fund | Stockholder | В |
| SP | Puna Plantation, LTD | Real Estate | Stockholder | I |
| | 50 E Puainako St. Hilo, HI | | | |
| SP | KTA Super Stores | Retail Supermarket | Stockholder | G |
| | 50 E Puainako St. Hilo, HI | | | |
| SP | TMT Investments | Real Estate | Partner | I |
| | 2040 Ainaola Place Hilo, HI | | | |

ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS

| F, SP, DC, JT | BUSINESS NAME AND ADDRESS | TITLE HELD | TERM OF OFFICE | ANNUAL COMPENS ATION |
|------------------------|-----------------------------------|------------|-------------------|----------------------------|
| F | Honpa Hongwanji Hilo Betsuin | Director | 2016 - 2018 | None |
| | 398 Kinoole St. Hilo, HI | Director | 2010 2010 | TONC |
| F | Honpa Hongwanji Mission of Hawaii | Director | 2012 - Present | None |
| | 1727 Pali Hwy. Honolulu, HI | | | |
| F | Hawaii County Employees FCU | Director | 2010 - Present | None |
| | 131 Puuhonu Way Hilo, HI | | | |
| F | Hilo High School Foundation | Director | 2009 - Present | None |
| | 556 Waianuenue Av. Hilo, Hi | | | |
| SP | Puna Plantation, LTD | Director | 1992 - Present | A |
| | 50 E Puainako St. Hilo, HI | | | |
| SP | KTA Super Stores | Director | 1992 - Present | В |
| | 50 E Puainako St. Hilo, HI | | | |

| SP | Crime Stoppers in Hilo | Director | 2007 - Present | None |
|----|-----------------------------------|----------|----------------|------|
| | 394 Kapiolani St. Hilo, HI | | | |
| SP | Hawaii Island United Way | Director | 2009 - Present | None |
| | 142 Kinoole St., Suite A Hilo, HI | | | |

ITEM 6: INTEREST IN REAL PROPERTY HELD, EXCLUDING PERSONAL RESIDENCE

| F, SP, DC, | | | |
|------------------|----------------------|--------------------|-------|
| JT | STREET ADDRESS | TAX MAP KEY | VALUE |
| SP | 106 Kaikuono Street | 3-2-5-031-020-0000 | G |
| | Hilo, HI 96720 | | |
| SP | 1673 Kilauea Avenue | 3-3-2-038-066-0000 | G |
| | Hilo, HI 96720 | | |
| SP | 300 Ponahawai Street | 3-2-3012-017-0000 | F |
| | Hilo, HI 96720 | | |
| SP | 956 Kumukoa Street | 3-2-4-066-002-0000 | G |
| | Hilo, HI 96720 | | |