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

FILER		DAN				MICH	
			NIEL			MICHI M.I.	
	E EMPLOYEES		FOR STA	TE B	OARD/COMMISSI	ON MEMBERS	
	y of Hawaii		Daniel Oceanic in the New Co				
Department  Office of the Vice President for Research &			Board/Commission Name				
Division	the vice i resident for ives	scarcii a	BEGIN		END		
	e Vice President for Feder	al Resea	Term of Office (mm/dd/yyyy)				
Position	y 1100 1 1001d0111 101 1 0d01	di i tooot					
	ACH ITEM, EXCEPT ITEM 9, DISCLOREVIATIONS: "F" for filer, "SP" for spouse						
	ITEM 1: INCOME FOR SERVI and amount of all income of \$1,000 or m NED FROM YOUR STATE POSITION), a	ore received dur	ing the preced	ding ca	lendar year for services		
F,SP, DC,JT NA	NAME OF EMPLOYER / OTHER SOURCE(S) OF INCOME		AMOUNT		SERVICES RENDERED		
Check h	nere if entry is None			/ Ch	eck here if additional	sheets are attached	
		OP RENEEIC	IAI INTEDES	STS IN	I BIISINESSES		
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> .							
F,SP, DC,JT NA	AME OF BUSINESS	NATURE OF B	USINESS	NAT	URE OF INTEREST	VALUE OR NO. OF SHARES	
	· ·						
✓ Check here if entry is None				│ │ Ch	eck here if additional	sheets are attached	
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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 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.

NAME OF CLIENT		NAI	ME OF STATE AGENCY			
√ Che	ck here if entry is None	1	Che	eck here if additional she	eets are attached	
			RESTS IN INSOLVENT BU			
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.					erest has a value of	
F,SP, DC,JT	NAME OF BUSINESS		NATURE OF BUSINESS	NATURE OF INTEREST	VALUE	
✓ Check here if entry is None     Check here if additional sheets are attached						
FILER						
DANIEL MICHIO ISHII			05/17/2016			
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** University of Hawaii

**Division** Office of the Vice President for Research & Innovation

State Employee Position Associate Vice President for Federal Research Relations

**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 University of Hawaii

Item #1 Compensation received G: At least \$150,000 but less than \$250,000

Item #1 Description of services rendered Salary

START Item #2 Who holds interest? Filer

Item #2 Name of Employer/ Other source of income Rental Income

Item #2 Compensation received C: At least \$10,000 but less than \$25,000

Item #2 Description of services rendered Gross annual income from rental of Condo.

START Item #3 Who holds interest? Spouse

Item #3 Name of Employer/ Other source of income University of Hawaii

Item #3 Compensation received E: At least \$50,000 but less than \$100,000

Item #3 Description of services rendered Salary

START Item #4 Who holds interest? Spouse

Item #4 Name of Employer/ Other source of income Research Corporation of the University of Hawaii

Item #4 Compensation received D: At least \$25,000 but less than \$50,000

Item #4 Description of services rendered Salary

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 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** 

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 Bank of Hawaii - Home Mortgage

Item #1 Original amount owed H: At least \$250,000 but less than \$500,000

Item #1 Amount outstanding H: At least \$250,000 but less than \$500,000

START Item #2 Who holds interest? Spouse

Item #2 Legal name of creditor University of Hawaii Federal Credit Union - Auto Loan

Item #2 Original amount owed C: At least \$10,000 but less than \$25,000

Item #2 Amount outstanding B: At least \$1,000 but less than \$10,000

START Item #3 Who holds interest? Joint

Item #3 Legal name of creditor First Hawaiian Bank - Home Equity Loan Line of Credit (Tuition)

Item #3 Original amount owed C: At least \$10,000 but less than \$25,000

Item #3 Amount outstanding A: Less than \$1,000

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 Original amount owe

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 McKinley High School Foundation

Item #1 Title held Director

Item #1 Term of Office Through annula meeting in 2017

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

START Item #2 Who holds interest? Filer

Item #2 Legal name of entity Honolulu Festival Foundation

Item #2 Title held Director

Item #2 Term of Office Till resignation

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

START Item #3 Who holds interest? Filer

Item #3 Legal name of entity Pacific Housing Assistance Cororation

Item #3 Title held Driector, Treasurer

Item #3 Term of Office Through annual meeting in 2017

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

START Item #4 Who holds interest? Joint

Item #4 Legal name of entity Daniel M. & Cheryl A.S. Ishii Trust

Item #4 Title held Trustee

Item #4 Term of Office Indefinate

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

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) Yes, I have items

# START Item #1 Who holds interest? Joint

Item #1 Street address Kings Land by HGVC 69-699 Waikoloa Beach Drive

Waikoloa, Hawaii 96738

**United States** 

Item #1 Tax Map Key PARID: 6900801200000

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

START Item #2 Who holds interest? Joint

Item #2 Street address 2754 Kuilei Strewet Apt 1502

Honolulu, Hawaii 96826

**United States** 

Item #2 Tax Map Key TMK: 27017002:0000

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

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 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 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 DANIEL MICHIO ISHII