HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

FILER							
Ihara, Jr.	Les		Seichi				
Last Name	First Name		M.I.				
FOR STATE EMPLOYEES	FOR STATE	BOARD/COMMISSIO	ON MEMBERS				
Legislature	1000000						
Department	Board/Commi	ssion Name					
Senate							
Division	BEGIN	END					
State Senator	Term of Office	e (mm/dd/yyyy)					
Position							
FOR EACH ITEM, EXCEPT ITEM 9, DISCLOSE IN USE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC"							
ITEM 1: INCOME FOR SERVICES R List the source and amount of all income of \$1,000 or more rece INCOME EARNED FROM YOUR STATE POSITION), and the	eived during the preceding	calendar year for services r					
F,SP, DC,JT NAME OF EMPLOYER / OTHER SOURCE(S) OF INC	COME AMOUNT	SERVICES RENDERED					
Check here if entry is None	✓ (Check here if additional s	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 .							
F,SP, DC,JT NAME OF BUSINESS NATU	RE OF BUSINESS N	IATURE OF INTEREST	VALUE OR NO. OF SHARES				
Check here if entry is None		Check here if additional s					

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	The strip of beneficial interests in basinesses	s transferred during the disc	oloouic	period and the date of train	JICI.	
F,SP, DC,JT	OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD					
Che	eck here if entry is None		√	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	
- /-						
√ Che	ck here if entry is None			Check here if additiona	I 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 organization, the term of office, and the annual compensation.						
F,SP, DC,JT	NAME OF BUSINESS	TITLE HELD	TE	ERM OF OFFICE	ANNUAL COMPENSATION	
,						
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.

proporty un	arie yeur percenai reciaence er and percenai reciaence er	your opouce or deportable or mark	on not be noted.		
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.

NAME OF CLIENT			ME OF STATE AGENCY		
√ Che	ck here if entry is None		Che	ck 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
./ Che	ck here if entry is None		Che	ck here if additional she	ets are attached
Check here if entry is None					
FILER					
Les Seichi Ihara, Jr. 01/31/2017				2017	
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.

Filer Name Les Seichi Ihara, Jr.

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 Senate

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

Item #1 Description of services rendered legislative

START Item #2 Who holds interest? Spouse

Item #2 Name of Employer/ Other source of income Morgan Stanley

Item #2 Compensation received G: At least \$150,000 but less than \$250,000

Item #2 Description of services rendered financial services

START Item #3 Who holds interest? Spouse

Item #3 Name of Employer/ Other source of income Manoa Galley

Item #3 Compensation received C: At least \$10,000 but less than \$25,000

Item #3 Description of services rendered art sales

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 Apple, Inc.

Item #1 Nature of business technology

Item #1 Nature of interest stocks

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? Spouse

Item #2 Legal name of business Manoa Gallery

Item #2 Nature of business Arts & Entertainment

Item #2 Nature of interest 100% ownership

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

Item #2 Number of Shares

START Item #3 Who holds interest? Spouse

Item #3 Legal name of business Apple, Inc.

Item #3 Nature of business technology

Item #3 Nature of interest stocks

Item #3 Value of interest F: At least \$100,000 but less than \$150,000

Item #3 Number of Shares

START Item #4 Who holds interest? Spouse

Item #4 Legal name of business Alphabet Inc.

Item #4 Nature of business technology

Item #4 Nature of interest stocks

Item #4 Value of interest C : At least \$10,000 but less than \$25,000

Item #4 Number of Shares

START Item #5 Who holds interest? Spouse

Item #5 Legal name of business Miler Howard Investments, Inc.

Item #5 Nature of business infrastructure

Item #5 Nature of interest stocks

Item #5 Value of interest E: At least \$50,000 but less than \$100,000

Item #5 Number of Shares

START Item #1 Who holds interest? Filer

Item #1 Ownership or beneficial interest transferred during this disclosure period 140 shares of Apple, Inc.

Item #1 Date of transfer Jan 19, 2016

START Item #2 Who holds interest? Spouse

Item #2 Ownership or beneficial interest transferred during this disclosure period 1,372 shares of Apple, Inc.

Item #2 Date of transfer Mar 03, 2016

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 Yes, I have items

START Item #1 Who holds interest? Filer

Item #1 Legal name of entity Charles F. Kettering Foundation

Item #1 Title held Trustee

Item #1 Term of Office 2010 to present

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

START Item #2 Who holds interest? Filer

Item #2 Legal name of entity Cooke Foundation, Ltd.

Item #2 Title held Director

Item #2 Term of Office 1992-present

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

START Item #3 Who holds interest? Joint

Item #3 Legal name of entity Kualii Foundation

Item #3 Title held Director

Item #3 Term of Office 1996 to present

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

START Item #4 Who holds interest? Spouse

Item #4 Legal name of entity Manoa Heritage Center

Item #4 Title held Director

Item #4 Term of Office 2000 to present

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

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 C

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 Les Seichi Ihara, Jr.