HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

FILER						
Tschum	Tschumy Ruth				D.	
Last Name	2	First I	Name		M.I.	
FOR STATE EMPLOYEES			FOR STATE BOARD/COMMISSION MEMBERS			
FUR STA	TE EMIFLOTEES					
				State Ethics Comr	nission	
Departmer	nt		Board/Commission Name			
			08/12/20	013 06/3	30/2017	
Division			BEGIN END			
			Term of Office (mm/dd/yyyy)			
Position						
	R EACH ITEM, EXCEPT ITEM 9, DISCLOBBREVIATIONS: "F" for filer, "SP" for spous					
	ITEM 1: INCOME FOR SERV	ICES RENDER	ED FOR PRE	CEDING CALENDAR YEA	AR .	
	ce and amount of all income of \$1,000 or m RNED FROM YOUR STATE POSITION), a				s rendered (INCLUDING	
F,SP, DC,JT	NAME OF EMPLOYER / OTHER SOURCE(S)	OF INCOME	AMOUNT	SERVICES RENDERED)	
20,01	TO THE OF EACH ESTERY STILL SOURCE(S)	7 OT INCOME	7111100141	SERVICES RENDEREE	,	
Checl	k here if entry is None		√	Check here if additiona	Il sheets are attached	
	ITEM 2: OWNERSHIP	OP RENEEIC	IAI INTEDES	TO IN BUIGINESSES		
	unt and identity of every ownership or bene-	ficial interest hel	d during the dis	sclosure period in any busine		
	nterest has a value of \$5,000 or more or is e FOCKS, MUTUAL FUNDS OR OTHER NON					
	nstructions available at http://ethics.hawaii.g			THE TENED TO THE OLD THE	o,ooo on mone.	
F,SP, DC,JT	NAME OF BUSINESS	NATURE OF B	LICINECC	NATURE OF INTEREST	VALUE OR NO. OF SHARES	
DC,31	NAME OF BUSINESS	NATURE OF B	OSINESS	NATORE OF INTEREST	OF SHARES	
				<u> </u>		
Checl	k here if entry is None		\checkmark	Check here if additiona	al 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	OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD					
	ck baro if antry is None		Chack have if addition	al choots are attached		
Cne	ck here if entry is None		Check here if additiona	al sneets are attached		
List the nar	me of each creditor to whom the value of \$3,0 tstanding. Exclude debts from retail installmen	ITEM 4: CREDITORS 000 or more was owed during nt transactions for the purchase	the disclosure period and the se of consumer goods.	original amount and		
F,SP, DC,JT	NAME OF CREDITOR		ORIGINAL AMOUNT OWED	AMOUNT OUTSTANDING		
Che	ck here if entry is None	١	Check here if additiona	al 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	TERM OF OFFICE	ANNUAL COMPENSATION		
./ Che	ck here if entry is None	Г	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 the	at is your personal residence or 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)	(MAP VALUE			
-,-						
☐ cho	ck hara if antry is Nana	Chack hara	if additional sheets are attached			
Cile	ck here if entry is None					
ITEM 7: INTERESTS IN REAL PROPERTY ACQUIRED, EXCLUDING PERSONAL RESIDENCE(S) List interests in real property in or outside of the State acquired 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.						
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	FERRED. EXCLUDING PERS	SONAL RESIDENCE(S)			
	ts in real property in or outside of the State transferred dur rty that was your personal residence or the personal reside	ng the disclosure period, if the in	terest 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		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 am \$5,000 or r	nount and identity of every creditor interest in insc more.	lvent	businesses, held during the	disclosure period, if the inte	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					
Ruth D. Tschumy 05/17/2017				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.

Check all that apply. - State Board/Commission Member

Department

Division

State Employee Position

State Board or Commission Name Hawaii State Ethics Commission

Term of Office Start Aug 12, 2013

Term of Office End Jun 30, 2017

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 rental income

Item #1 Compensation received C: At least \$10,000 but less than \$25,000

Item #1 Description of services rendered Rental Property

620 Palmarito Ct.

Coral Gables FL 33133

START Item #2 Who holds interest?

Item #2 Name of Employer/ Other source of income

Item #2 Compensation received

Item #2 Description of services rendered

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 AT&T

Item #1 Nature of business AT&T

Item #1 Nature of interest stockholder

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

Item #1 Number of Shares 308.0

START Item #2 Who holds interest? Filer

Item #2 Legal name of business Exxon Mobile

Item #2 Nature of business XOM

Item #2 Nature of interest stockholder

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

Item #2 Number of Shares 441.0

START Item #3 Who holds interest? Filer

Item #3 Legal name of business International Business Machines

Item #3 Nature of business IBM

Item #3 Nature of interest stockholder

Item #3 Value of interest C : At least \$10,000 but less than \$25,000

Item #3 Number of Shares 80.0

START Item #4 Who holds interest? Filer

Item #4 Legal name of business DeutschX-Trackers MSCI Nur

Item #4 Nature of business DBEU

Item #4 Nature of interest equity

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

Item #4 Number of Shares 500.0

START Item #5 Who holds interest? Filer

Item #5 Legal name of business | Shares

Item #5 Nature of business AGG

Item #5 Nature of interest equity holder

Item #5 Value of interest D : At least \$25,000 but less than \$50,000

Item #5 Number of Shares 100.0

START Item #1 Who holds interest? Filer

Item #1 Ownership or beneficial interest transferred during this disclosure period Abbot (ABT)

Item #1 Date of transfer Nov 06, 2016

START Item #2 Who holds interest? Filer

Item #2 Ownership or beneficial interest transferred during this disclosure period ABBVIE (ABBV)

Item #2 Date of transfer Nov 08, 2016

START Item #3 Who holds interest? Filer

Item #3 Ownership or beneficial interest transferred during this disclosure period Alcatel (ALU)

Item #3 Date of transfer Jun 02, 2016

START Item #4 Who holds interest? Filer

Item #4 Ownership or beneficial interest transferred during this disclosure period Highland Premier (HPECX)

Item #4 Date of transfer Nov 08, 2016

START Item #5 Who holds interest? Filer

Item #5 Ownership or beneficial interest transferred during this disclosure period Lord Abbot Short (LDLAX)

Item #5 Date of transfer Oct 31, 2016

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 F : At least \$100,000 but less than \$150,000

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

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

START Item #1 Who holds interest? Joint

Item #1 Street address 620 Palmarito Ct.

Coral Gables, Florida 33133

United States

Item #1 Tax Map Key Lot 4,5,6, Block 141, Coral Gables C.C., Section 6, Plat Bk. 20, pg.1, Dade County, FL.

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

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

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 Ruth D. Tschumy

Ruth D. Tschumy Financial Disclosure Form

ITEM 2, cont:

Vanguard Interm

VCIT

400

C

Vanguard Long Term

VCLT

200

C

Vanguard Small Cap Growth

VBK

50

В

Vanguard Small Cap Value

VBR

50

В

Vanguard Total Bond

BNB

400

E

Hartford Floating

(HFLIX)

3,000

D

Pimco Income

PONPX

4181

E

Pioneer Strategic

STRYX

6115

Ε

Principal Short Term PSTPX 5230 В

Item 3 cont:
Pioneer Short STIIX 10/11/2016

Principal Short STCCX 10/11/2016

Prudential Short PIFCX 12/09/2016

Putnam Capital **PVSCX** 06/02/2016

** END **