

HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

FILER

Ige

Last Name

David

First Name

Yutaka

M.I.

FOR STATE EMPLOYEES

Office of the Governor

Department

Division

Governor

Position

FOR STATE BOARD/COMMISSION MEMBERS

Board/Commission Name

BEGIN

END

Term of Office (mm/dd/yyyy)

FOR EACH ITEM, EXCEPT ITEM 9, DISCLOSE INTERESTS OF FILER, SPOUSE, AND DEPENDENT CHILDREN.

USE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the spouse and filer.

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.

F, SP, DC, JT	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 <http://ethics.hawaii.gov>.

F, SP, DC, JT	NAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES

Check here if entry is None

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	OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD	DATE OF TRANSFER
<input type="checkbox"/> Check here if entry is None <input checked="" type="checkbox"/> Check here if additional 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
<input type="checkbox"/> Check here if entry is None <input checked="" type="checkbox"/> 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 organization, the term of office, and the annual compensation.

F,SP, DC,JT	NAME OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION
<input checked="" type="checkbox"/> Check here if entry is None <input type="checkbox"/> Check here if additional 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.

F,SP, DC,JT	STREET ADDRESS	TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	VALUE

Check here if entry is None

Check here if additional sheets are attached

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

Check 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

Check 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	NAME OF STATE AGENCY
<input checked="" type="checkbox"/> Check here if entry is None <input type="checkbox"/> Check here if additional sheets 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
<input checked="" type="checkbox"/> Check here if entry is None <input type="checkbox"/> Check here if additional sheets are attached				

FILER

David Yutaka Ige

05/31/2016

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.

Filer Name David Yutaka Ige

Check all that apply. - State Employee

Department Office of the Governor

Division

State Employee Position Governor

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

Item #1 Description of services rendered Duties and responsibilities of the Governor of the State of Hawaii.

START Item #2 Who holds interest? Spouse

Item #2 Name of Employer/ Other source of income State of Hawaii Department of Education (Kanoelani Elementary School)

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

Item #2 Description of services rendered Vice-Principal at Kanoelani Elementary School (currently on unpaid leave of absence).

START Item #3 Who holds interest? Joint

Item #3 Name of Employer/ Other source of income David and Dawn Ige Enterprises

Item #3 Compensation received D : At least \$25,000 but less than \$50,000

Item #3 Description of services rendered Income from rental of property (98-635 Kaahale Street, Aiea, HI, 96701)

START Item #4 Who holds interest? Dependent Child

Item #4 Name of Employer/ Other source of income University of Rochester

Item #4 Compensation received B : At least \$1,000 but less than \$10,000

Item #4 Description of services rendered Orchestra librarian

START Item #5 Who holds interest? Dependent Child

Item #5 Name of Employer/ Other source of income Johns Hopkins University

Item #5 Compensation received B : At least \$1,000 but less than \$10,000

Item #5 Description of services rendered Student employment

Category 2: Ownership or Beneficial Interests in Businesses Yes, I have items

START Item #1 Who holds interest? Joint

Item #1 Legal name of business David and Dawn Ige Enterprises

Item #1 Nature of business Home rental

Item #1 Nature of interest Owner (joint)

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

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

Category 3: Transfer of Ownership or Beneficial Interests in Businesses Yes, I have items

START Item #1 Who holds interest? Joint

Item #1 Ownership or beneficial interest transferred during this disclosure period Started David and Dawn Ige Enterprises

Item #1 Date of transfer Jul 01, 2015

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 Central Pacific Bank (1st Mortgage)

Item #1 Original amount owed I : At least \$500,000 but less than \$750,000

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

START Item #2 Who holds interest? Joint

Item #2 Legal name of creditor Central Pacific Bank (2nd Mortgage - Equity line of credit)

Item #2 Original amount owed D : At least \$25,000 but less than \$50,000

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

START Item #3 Who holds interest? Joint

Item #3 Legal name of creditor American Savings Bank

Item #3 Original amount owed D : At least \$25,000 but less than \$50,000

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

START Item #4 Who holds interest? Joint

Item #4 Legal name of creditor Central Pacific Bank

Item #4 Original amount owed E : At least \$50,000 but less than \$100,000

Item #4 Amount outstanding E : At least \$50,000 but less than \$100,000

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) Yes, I have items

START Item #1 Who holds interest? Joint
Item #1 Street address 98-635 Kaahele Street
Aiea, Hawaii 96701
United States
Item #1 Tax Map Key 1-9-8-066-084-0000
Item #1 Value K : At least \$1,000,000 or more
START Item #2 Who holds interest? Filer
Item #2 Street address 1108 Hookahi Street (Partial interest - 20%)
Pearl City, Hawaii 96782
United States
Item #2 Tax Map Key 1-9-6-20-48
Item #2 Value E : At least \$50,000 but less than \$100,000
START Item #3 Who holds interest? Joint
Item #3 Street address No street address, not developed
San Bernardino, California
United States
Item #3 Tax Map Key 0461-452-42-0-000
Item #3 Value C : At least \$10,000 but less than \$25,000
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 [Additional items for financial disclosure of DYI.pdf](#)

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 David Yutaka Ige

Additional items for financial disclosure of David Y. Ige
Submitted on May 31, 2016

1. INCOME FOR SERVICES RENDERED FOR PRECEDING CALENDAR YEAR

Item 6	Who	Dependent Child
	Source	Oceanit Laboratories Inc.
	Compensation	At least \$1,000 but less than \$10,000
	Services	Student intern