HAWAII STATE ETHICS COMMISSION
DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

FILER
Signed

Last Name First Name M.I.

FOR STATE EMPLOYEES

Department
Division

Position

FOR STATE BOARD/COMMISSION MEMBERS

Natural Energy Laboratory of Hawaii

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.


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.

<table>
<thead>
<tr>
<th>F, SP, DC, JT</th>
<th>NAME OF EMPLOYER / OTHER SOURCE(S) OF INCOME</th>
<th>AMOUNT</th>
<th>SERVICES RENDERED</th>
</tr>
</thead>
</table>

☐ 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.


<table>
<thead>
<tr>
<th>F, SP, DC, JT</th>
<th>NAME OF BUSINESS</th>
<th>NATURE OF BUSINESS</th>
<th>NATURE OF INTEREST</th>
<th>VALUE OR NO. OF SHARES</th>
</tr>
</thead>
</table>

☐ 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.

<table>
<thead>
<tr>
<th>F,SP.</th>
<th>OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD</th>
<th>DATE OF TRANSFER</th>
</tr>
</thead>
</table>

☑ Check here if entry is None ☐ 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.

<table>
<thead>
<tr>
<th>F,SP.</th>
<th>NAME OF CREDITOR</th>
<th>ORIGINAL AMOUNT OWED</th>
<th>AMOUNT OUTSTANDING</th>
</tr>
</thead>
</table>

☑ 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 organization, the term of office, and the annual compensation.

<table>
<thead>
<tr>
<th>F,SP.</th>
<th>NAME OF BUSINESS</th>
<th>TITLE HELD</th>
<th>TERM OF OFFICE</th>
<th>ANNUAL COMPENSATION</th>
</tr>
</thead>
</table>

☑ Check here if entry is None ☐ 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.

<table>
<thead>
<tr>
<th>F,SP, DC, JT</th>
<th>STREET ADDRESS</th>
<th>TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)</th>
<th>VALUE</th>
</tr>
</thead>
</table>

☐ 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.

<table>
<thead>
<tr>
<th>F,SP, DC, JT</th>
<th>STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)</th>
<th>AMOUNT &amp; NATURE OF CONSIDERATION PAID</th>
<th>NAME OF PERSON RECEIVING THE CONSIDERATION</th>
</tr>
</thead>
</table>

☑ 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.

<table>
<thead>
<tr>
<th>F,SP, DC, JT</th>
<th>STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)</th>
<th>AMOUNT &amp; NATURE OF CONSIDERATION RECEIVED</th>
<th>NAME OF PERSON FURNISHING THE CONSIDERATION</th>
</tr>
</thead>
</table>

☑ 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.

<table>
<thead>
<tr>
<th>NAME OF CLIENT</th>
<th>NAME OF STATE AGENCY</th>
</tr>
</thead>
</table>

☐ Check here if entry is None ☑ 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.

<table>
<thead>
<tr>
<th>F,S.P., DC, JT</th>
<th>NAME OF BUSINESS</th>
<th>NATURE OF BUSINESS</th>
<th>NATURE OF INTEREST</th>
<th>VALUE</th>
</tr>
</thead>
</table>

☐ Check here if entry is None ☑ Check here if additional sheets are attached

FILER

MICHAEL Paul ELDRED 06/01/2016

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: Michael Paul Eldred

Check all that apply.
- State Board/Commission Member

Department
Division
State Employee Position
State Board or Commission Name: Natural Energy Laboratory of Hawaii
Term of Office Start: Oct 01, 2015
Term of Office End: Oct 01, 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: Makai Ocean Engineering
Item #1 Compensation received: F : At least $100,000 but less than $150,000
Item #1 Description of services rendered: Salary engineer

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: Makai Ocean Engineering, Inc.
Item #1 Nature of business: engineering consulting firm
Item #1 Nature of interest: 2% ownership
Item #1 Value of interest: E : At least $50,000 but less than $100,000
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

<table>
<thead>
<tr>
<th>Item #</th>
<th>Who holds interest?</th>
<th>Ownership or beneficial interest transferred during this disclosure period</th>
<th>Date of transfer</th>
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</thead>
<tbody>
<tr>
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</table>

### Category 4: Creditors

<table>
<thead>
<tr>
<th>Item #</th>
<th>Who holds interest?</th>
<th>Legal name of creditor</th>
<th>Original amount owed</th>
<th>Amount outstanding</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>Filer</td>
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<tr>
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### Category 5: Officerships, Directorships, Trusteeships

<table>
<thead>
<tr>
<th>Item #</th>
<th>Who holds interest?</th>
<th>Legal name of entity</th>
<th>Title held</th>
<th>Term of Office</th>
<th>Annual compensation</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>
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 73-1551 heneli pl
KAILUA kona, HI 96740
United States
Item #1 Tax Map Key 3730240920000
Item #1 Value i : At least $500,000 but less than $750,000
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
Category 8: Interests in Real Property Transferred, excluding Personal Residence(s)  
None

Category 9: Clients Personally Represented before State Agencies  
None

Category 10: Creditor Interests in Insolvent Businesses  
None
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  MICHAEL Paul ELDRED