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

**FILER**

Quinlan  
Last Name  
Sean  
First Name  
M.I.  

### FOR STATE EMPLOYEES

**Department**  
Legislature  

**Division**  
House of Representative  

**Position**  
State Representative, District 47  

### FOR STATE BOARD/COMMISSION MEMBERS

**Board/Commission Name**

**Term of Office (mm/dd/yyyy)**

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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, DC, JT</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, DC, JT</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, DC, JT</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.</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

Sean Quinlan 12/31/2016

Type Name of Filer (First, M.I., Last)(Signature required on this line if you are filing a paper form)

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: Sean Quinlan

Check all that apply. - State Employee

Department: Legislature
Division: House of Representative
State Employee Position: State Representative, District 47

Category 1: Income for services rendered for preceding calendar year

None

Category 2: Ownership or Beneficial Interests in Businesses

Yes, I have items

Item #1 Who holds interest?
Item #1 Name of Employer/ Other source of income
Item #1 Compensation received
Item #1 Description of services rendered
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

Item #1 Legal name of business: Bitverse, LLC
Item #1 Nature of business: Web development.
Item #1 Nature of interest: 7.5% interest
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 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 #1</th>
<th>Who holds interest?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item #2</td>
<td>Ownership or beneficial interest transferred during this disclosure period</td>
</tr>
<tr>
<td>Item #3</td>
<td>Date of transfer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Item #2</th>
<th>Who holds interest?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item #3</td>
<td>Ownership or beneficial interest transferred during this disclosure period</td>
</tr>
<tr>
<td>Item #4</td>
<td>Date of transfer</td>
</tr>
</tbody>
</table>

### Category 4: Creditors

<table>
<thead>
<tr>
<th>Item #1</th>
<th>Who holds interest?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item #2</td>
<td>Legal name of creditor</td>
</tr>
<tr>
<td>Item #3</td>
<td>Original amount owed</td>
</tr>
<tr>
<td>Item #4</td>
<td>Amount outstanding</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Item #2</th>
<th>Who holds interest?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item #3</td>
<td>Legal name of creditor</td>
</tr>
<tr>
<td>Item #4</td>
<td>Original amount owed</td>
</tr>
<tr>
<td>Item #5</td>
<td>Amount outstanding</td>
</tr>
</tbody>
</table>

### Category 5: Officerships, Directorships, Trusteeships

<table>
<thead>
<tr>
<th>Item #1</th>
<th>Who holds interest?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item #2</td>
<td>Legal name of entity</td>
</tr>
<tr>
<td>Item #3</td>
<td>Title held</td>
</tr>
<tr>
<td>Item #4</td>
<td>Term of Office</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Item #2</th>
<th>Who holds interest?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item #3</td>
<td>Legal name of entity</td>
</tr>
<tr>
<td>Item #4</td>
<td>Title held</td>
</tr>
<tr>
<td>Item #5</td>
<td>Term of Office</td>
</tr>
</tbody>
</table>
## Category 6: Interests in Real Property Held, excluding Personal Residence(s)

None

<table>
<thead>
<tr>
<th>Item</th>
<th>Who holds interest?</th>
<th>Street address</th>
<th>Tax Map Key</th>
<th>Value</th>
</tr>
</thead>
</table>

## Category 7: Interests in Real Property Acquired, excluding Personal Residence(s)

None

<table>
<thead>
<tr>
<th>Item</th>
<th>Who holds interest?</th>
<th>Street address</th>
<th>Tax Map Key</th>
<th>Amount of consideration paid</th>
<th>Nature of consideration paid</th>
<th>Legal name of person or entity receiving the consideration</th>
</tr>
</thead>
</table>
Category 8: Interests in Real Property Transferred, excluding Personal Residence(s)

Yes, I have items

Item #1 Who holds interest? Joint
Item #1 Street address 95-1014 Halekia Street
Millilani, Hawaii 96789
United States
Item #1 Tax Map Key 1-9-5-072-064-0000
Item #1 Amount of consideration received At least $500,000 but less than $750,000
Item #1 Nature of consideration received
Item #1 Legal name of person or entity furnishing the consideration Britney J.M. Shimamoto

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

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

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

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

Category 10: Creditor Interests in Insolvent Businesses

None
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 Sean Quinlan