

17 MAY 30 P 2:07

HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: SHORT FORM

FILER

Nishimoto
Last Name

Kerns
First Name

K
M.I.

FOR STATE EMPLOYEES

Department *Human Resources*
Development and
Division *Office of the Director*
Position *Director*

FOR STATE BOARD/COMMISSION MEMBERS

Board/Commission Name

BEGIN END
Term of Office (mm/dd/yyyy)

Check either number 1 or 2. If you check number 2, provide the relevant information.

- I HAVE NO CHANGES TO REPORT SINCE MY LAST FILING.
- I HAVE THE FOLLOWING CHANGES TO REPORT SINCE MY LAST FILING. For each addition, deletion, or other change of a financial interest: (1) Indicate who holds the interest, by checking one of the following: "Filer," if you hold the interest; "Spouse," if your spouse holds the interest; "Dependent Child," if your dependent child holds the interest; or "Jointly," if you and your spouse jointly hold the interest; (2) Check "Addition," to indicate the addition of an interest; "Deletion," to indicate the deletion of an interest; or "Change," to indicate any other change of an interest; (3) Describe the interest by following the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions." Also, provide the appropriate item number for the interest you are describing.

| | | |
|---|---|---|
| <p>Check One:</p> <input checked="" type="checkbox"/> Filer <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Dependent Child <input type="checkbox"/> Joint | <p>Check One:</p> <input type="checkbox"/> Addition <input type="checkbox"/> Deletion <input type="checkbox"/> Change | <p>ITEM # <u>2</u> (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.")</p> <p><i>See Attached</i></p> |
| <p>Check One:</p> <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Child <input type="checkbox"/> Joint | <p>Check One:</p> <input type="checkbox"/> Addition <input type="checkbox"/> Deletion <input type="checkbox"/> Change | <p>ITEM # _____ (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.")</p> |
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FILER

[Handwritten Signature]

Filer's Signature

5/30/17

Date

CERTIFICATION: 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.

| T, SP, DC, JT | NAME OF BUS. | NATURE OF BUS. | NATURE OF INT. | VALUE OR NO. OF SHARES |
|---------------|-------------------------------|--------------------|----------------|------------------------|
| F | AGILENT TECHNOLOGIES INC | SCIENCE/TECHNOLOGY | SHAREHOLDER | B |
| F | AMGEN INC | MEDICAL | SHAREHOLDER | D |
| F | CISCO SYSTEMS INC | COMPUTER | SHAREHOLDER | B |
| F | COCA COLA CO COM | BEVERAGE | SHAREHOLDER | C |
| F | GENERAL ELECTRIC CO | INDUSTRIAL | SHAREHOLDER | B |
| F | KEYSIGHT TECHNOLOGIES INC COM | ELECTRONICS | SHAREHOLDER | B |
| F | MICROSOFT CORP | COMPUTER | SHAREHOLDER | C |
| F | ORACLE CORP | COMPUTER | SHAREHOLDER | E |
| F | PROCTOR & GAMBLE CO | DURABLE GOODS | SHAREHOLDER | C |
| F | SMUCKER J M CO NEW | FOOD | SHAREHOLDER | A |
| F | WALT DISNEY CO | ENTERTAINMENT | SHAREHOLDER | D |
| F | 3M CO | PAPER GOODS | SHAREHOLDER | C |
| F | OPPENHEIMER MAIN STREET | MUTUAL FUND | SHAREHOLDER | F |
| F | AR GLOBAL BOND FUND | MUTUAL FUND | SHAREHOLDER | E |
| F | OPPENHEIMER GLOBAL | MUTUAL FUND | SHAREHOLDER | E |
| F | UBS U.S. ALLOCATION FUND | MUTUAL FUND | SHAREHOLDER | D |
| JT | CBS CORP NEW CL B SHRS | ENTERTAINMENT | SHAREHOLDER | C |
| IT | IBM | COMPUTER | SHAREHOLDER | E |
| JT | PG&E CORPORATION | DURABLE GOODS | SHAREHOLDER | C |
| JT | VIACOM INC NY W CLASS B | TELECOMMUNICATIONS | SHAREHOLDER | B |
| JT | MS US GOVERNMENT SEC TR B | MUTUAL FUND | SHAREHOLDER | E |

5/30/17
 Joan K. [Signature]