

HAWAII STATE ETHICS COMMISSION SHORT FORM DISCLOSURE OF FINANCIAL INTERESTS

NAME (Last, First, Middle) Stender, Oswald Kofoad	STATE POSITION HELD: (Dept/Div or Board/Commission) Trustee At-large - Office of Hawaiian Affairs TERM OF OFFICE (Begin/End): November 2010 - November 2014
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Check either number 1 or 2. If you check number 2, provide the relevant information.

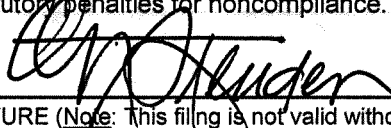
1. I HAVE NO CHANGES TO REPORT SINCE MY LAST FILING.

2. 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 circling 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) Circle "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.

Circle One: Filer Spouse Dependent Child <input checked="" type="radio"/> Jointly	Circle One: Addition Deletion <input checked="" type="radio"/> Change	ITEM # 4 (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") Bank of Hawaii Owed: I Outstanding: I Main Branch 76813 Honolulu, HI 96813
Circle One: <input checked="" type="radio"/> Filer Spouse Dependent Child Jointly	Circle One: Addition <input checked="" type="radio"/> Deletion Change	ITEM # 4 (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") Hawaii State Federal Credit Union P.O. Box 3072 Honolulu, HI 96802-3072
Circle One: <input checked="" type="radio"/> Filer Spouse Dependent Child Jointly	Circle One: Addition <input checked="" type="radio"/> Deletion Change	ITEM # 5 (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") Hawaiian Telcom 1177 Bishop St., Honolulu, HI 96813
Circle One: <input checked="" type="radio"/> Filer Spouse Dependent Child Jointly	Circle One: Addition <input checked="" type="radio"/> Deletion Change	ITEM # 5 (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") Hawaii Tax Free Trust/Cash Assets Trust c/o Aquila Management Corp. 380 Madison Ave., Ste. 2300 New York, NY 10017

<u>Circle One:</u> <input checked="" type="radio"/> Filer <input type="radio"/> Spouse <input type="radio"/> Dependent Child <input type="radio"/> Jointly	<u>Circle One:</u> <input type="radio"/> Addition <input checked="" type="radio"/> Deletion <input type="radio"/> Change	ITEM # <u>5</u> (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") Pacific Capital Funds 130 Merchant St. Honolulu, HI 96813
<u>Circle One:</u> <input type="radio"/> Filer <input type="radio"/> Spouse <input type="radio"/> Dependent Child <input type="radio"/> Jointly	<u>Circle One:</u> <input type="radio"/> Addition <input type="radio"/> Deletion <input type="radio"/> Change	ITEM # _____ (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.")
<u>Circle One:</u> <input type="radio"/> Filer <input type="radio"/> Spouse <input type="radio"/> Dependent Child <input type="radio"/> Jointly	<u>Circle One:</u> <input type="radio"/> Addition <input type="radio"/> Deletion <input type="radio"/> Change	ITEM # _____ (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.")
<u>Circle One:</u> <input type="radio"/> Filer <input type="radio"/> Spouse <input type="radio"/> Dependent Child <input type="radio"/> Jointly	<u>Circle One:</u> <input type="radio"/> Addition <input type="radio"/> Deletion <input type="radio"/> Change	ITEM # _____ (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.")
<u>Circle One:</u> <input type="radio"/> Filer <input type="radio"/> Spouse <input type="radio"/> Dependent Child <input type="radio"/> Jointly	<u>Circle One:</u> <input type="radio"/> Addition <input type="radio"/> Deletion <input type="radio"/> Change	ITEM # _____ (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.")
<u>Circle One:</u> <input type="radio"/> Filer <input type="radio"/> Spouse <input type="radio"/> Dependent Child <input type="radio"/> Jointly	<u>Circle One:</u> <input type="radio"/> Addition <input type="radio"/> Deletion <input type="radio"/> Change	ITEM # _____ (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.")

CERTIFICATION: I have reviewed my previous Disclosure of Financial Interests Statements filed with the Hawaii State Ethics Commission and all succeeding amendments. I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief of my currently reportable financial interests and that there have been no other changes in my reportable financial interests since my prior reports were filed. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.



10/6/11

SIGNATURE (Note: This filing is not valid without an original signature.)

DATE