

SUPREME COURT CLERK'S OFFICE 417 SOUTH KING STREET HONOLULU, HAWAII 96813-2912

FINANCIAL DISCLOSURE STATEMENT

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Before completing this form please read the instructions for Financial Disclosure Statement, including the text of Supreme Court Rule 15. REMINDER: For all items requiring a monetary amount, the following financial range codes may be used.

- A Less than \$1,000
- B At least \$1,000 but less than \$10,000
- C At least \$10,000 but less than \$25,000
- D At least \$25,000 but less than \$50,000
- E At least \$50,000 but less than \$100,000
- F At least \$100,000 but less than \$150,000
- G At least \$150,000 but less than \$250,000 H - At least \$250,000 but less than \$500,000
- I At least \$500,000 but less than \$750,000
- J At least \$750,000 but less than \$1,000,000
- K -\$1,000,000 or more

TO BE FILED BY ALL FULL TIME AND PER DIEM JUDGES.

| | | (T | ype or Print Clearly) | | | |
|-------------------------|---|--------------------------------|-----------------------|---------------------------|---|---------------------------|
| IN/AIVIL. | unaga _AST) | Margaret (FIRST) | K. | (MIDDLE) | NAME OF SPO | DUSE OR DOMESTIC PARTNER: |
| OFFICE ADDRES | 79-1020 Haukapila | | 96750 | (MIDDLE) | Mr. Gail M No. of Depende (Do not include | ent Children: |
| CITT OR TOWN. | | ZIF COI | DE | _ | • | |
| JUDICIAL POSITI | ON HELD | DATE OF APPOINTMENT 12/02/2014 | | OFFICE PH (808) 322-87 | | |
| CALENDAR YEAR | R COVERED BY THIS DISCLOSU | re: 20 <u>17</u> | | | | |
| ITEM 1 RSCH 15(d)(1) | JUDICIAL COMPENSATION | 1 | | | | ANNUAL INCOME G |
| ITEM 2 RSCH 15(d)(1) | JUDGE'S OTHER INCOME (if income for services rende | red exceeds \$1,000) | | | 1 | |
| | EMPLOYER/LAW FIRI | Л | BUSINE | SSADDRESS | | ANNUAL INCOME |
| ITEM 3 RSCH 15(d)(1) | INCOME OF SPOUSE OR I | | D DEPENDENT CHILDRI | EN | | |
| UPS | | EMPLOYER | | | | ANNUAL INCOME D |
| | | | | | | |

| ITEM 4 RSCH 15(d)(1) | ANY OTHER INCOME, FOR SERVICES RENDERED, IN EXCESS OF \$1,000 - INCOME DISCLOSED IN ITEMS 1 - 3 NEED NOT BE REPEATED HERE | | | | | |
|-------------------------|---|-----------------------|---|--------------------|---|--|
| | SOURCE | NATURI | E OF SERVICES REN | DERED | AMOUNT | |
| V | Check here if entry is None | Check here if you h | nave attached additiona | al sheets | | |
| ITEM 5 RSCH 15(d)(2) | EACH OWNERSHIP OR BENEFICIAL II VALUE OF \$5,000 OR MORE OR EQU. | | | | TE, HAVING A | |
| | NAME OF BUSINESS | NATURE C | DF BUSINESS | NATURE OF INTEREST | ENTER AMOUNT OR NO. OF SHARES | |
| Deferred Co | mpensation | Retirement Fu | n | Stocks, bonds | Н | |
| | Check here if entry is None | Check here if you h | Check here if you have attached additional sheets | | | |
| ITEM 6 RSCH 15(d)(2) | OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD. | | | | | |
| | NAME OF BUSINESS | DATE OF | TRANSFER | VALUE OF TR | ANSFER | |
| | Check here if entry is None Check here if you have attached additional sheets | | | | | |
| ITEM 7 RSCH 15(d)(3) | | | | | | |
| _ | NAME OF BUSINESS Check here if entry is None | ☐ Check here if you h | | D TERM OF OFFICE | COMPENSATION (enter amount or NONE) | |

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| ITEM 8 RSCH 15(d)(4) | | | ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS EDED \$10,000 FOR SIX MONTHS OR MORE. | OWED DURING THE DISCLOSURE | |
|---|---------------------------|--------------------------|---|-----------------------------|--|
| | NAME AND ADDRES | S OF CREDITOR | ORIGINAL AMOUNT OWED | AMOUNT OWED AT END OF YEAR | |
| Wells Fargo I | Home Mortgage | | Н | Н | |
| POB 51162 | | | | | |
| Los Angeles, | CA 90051 | | | | |
| | | | | | |
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| | Check here if entry is No | one | k here if you have attached additional sheets | | |
| ITEM 9 RSCH 15(d)(5) | REAL PROPERTY IN | THE STATE IN WHICH IS HE | ELD AN INTEREST WITH A FAIR MARKET VALUE | OF \$10,000 OR MORE. | |
| | | POSTAL ZIP CODE OF LOC | CATION | VALUE | |
| 96704 | | | | I | |
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| | Check here if entry is No | one | k here if you have attached additional sheets | | |
| ITEM 10 RSCH 15(d)(5) | REAL PROPERTY, T | HE FAIR MARKET VALUE OF | WHICH EXCEEDS \$10,000, ACQUIRED DURING | THE DISCLOSURE PERIOD. | |
| POSTAL ZIP C | ODE OF LOCATION | NATURE OF INTEREST | NAME AND ADDRESS OF PERSON RECEIVING CONSIDERATION | CONSIDERATION GIVEN | |
| | | | CONCIDENTION | | |
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| ☑ Check here if entry is None ☐ Check here if you have attached additional sheets | | | | | |
| ITEM 11 RSCH 15(d)(5) | REAL PROPERTY, T | HE FAIR MARKET VALUE OF | WHICH EXCEEDS \$10,000, TRANSFERRED DUF | RING THE DISCLOSURE PERIOD. | |
| POSTAL ZIP C | ODE OF LOCATION | NAME AND ADDRESS OF F | PERSON FURNISHING CONSIDERATION | CONSIDERATION RECEIVED | |
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| ☐ Check here if entry is None ☐ Check here if you have attached additional sheets | | | | | |

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| ITEM 12 RSCH 15(d)(6) | CREDITOR INTEREST IN INSOLVENT BUSINESS HAVING A VALUE OF \$5,000 OR MORE. | | | | | |
|--|--|---------------------------------------|----------------------|-------|--|--|
| N | NAME OF BUSINESS NATURE OF INTEREST V | | | VALUE | | |
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| <u> </u> | Check here if entry is None | Check here if you have attache | ed additional sheets | | | |
| ITEM 13 | | | | | | |
| RSCH 15(d)(7); Rule 3.13 Revised Code of Judicial Conduct | GIFT(S) THAT MUST BE REPORTED UNDER RULE 3.13(c) OF THE HAWAII REVISED CODE OF JUDICIAL CONDUCT. | | | | | |
| | SOURCE | DESCRIPTI | ESTIMATED VALUE | | | |
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| | Check here if entry is None | Check here if you have attached | ed additional sheets | | | |
| ITEM 14 RSCH 15(d)(8) & 22(h) | FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION | | | | | |
| l attended 2 | 1.00 hours of Approved Judicia | al Education during the reporting per | iod. | | | |
| REMARKS: | | | | | | |
| rezwitte. | | | | | | |
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| See attached sheets. | | | | | | |
| CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement. | | | | | | |
| SIGNATURE: /s/ Margaret K. Masunaga DATE: 04/03/2018 | | | | | | |
| | | | | | | |
| NOTE: This filing is not valid without a signature. | | | | | | |

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