

## SUPREME COURT CLERK'S OFFICE 417 SOUTH KING STREET HONOLULU, HAWAI'I 96813-2912

FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

**Electronically Filed Supreme Court** SCFD-11-0000179 30-APR-2020 12:17 PM

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 SHOULD 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.

(Type only)						
NAME:	Ayabe	9	Bert	Ų	NAME OF SPO	DUSE OR DOMESTIC PARTNER:
NAME	(L	AST)	(FIRST)	(MIDDLE)	Gail Ayab	е
OFFICE ADDRESS: 777 Punchbowl Street No. of Depende (Do not include						ent Children:
	e names)					
CITY OR TO	OWN:	Honolulu	ZIP COD	96813 E:	0	
JUDICIAL P	OSITIC	N HELD	DATE OF APPOINTMENT		OFFICE PHONE	
Circuit Co	ourt J	udge	June 10	, 2014	539-	4580
CALENDAR	RYEAR	COVERED BY THIS DISCLOSURE:	20 <u>19</u>			
ITEM	1	JUDICIAL COMPENSATION				ANNUAL INCOME
RSCH 15(d)	)(1)					G
ITEM RSCH 15(d)	2 )(1)	JUDGE'S OTHER INCOME (if income for services rendered	exceeds \$1,000)			
,		EMPLOYER/LAW FIRM		BUSINESS A	DDRESS	ANNUAL INCOME
ITEM RSCH 15(d)	3	INCOME OF SPOUSE OR DOM (if income for services rendered		PENDENT CHILDREN		
		,	EMPLOYER			ANNUALINCOME
Goodsill Anderson Quinn and Stifel					Н	
197						

SOURCE NATURE OF SERVICES RENDERED AMOUNT    Check here if entry is Note	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						
TIEM 5 NAME OF BUSINESS  NATURE OF BUSINESS  TITLE AND TERM OF OFFICE  COMPENSATION (enter amount or NONE)  None  None  None	SOURCE		١	NATURE OF SERVICES RENDERED		AMOUNT		
TIEM 5 NAME OF BUSINESS  NATURE OF BUSINESS  DATE OF TRANSFERRED DURING THIS DISCLOSURE PERIOD  NAME OF BUSINESS  DATE OF TRANSFERR  VALUE OF TRANSFER  VALUE OF TRANSFER  04/21/2019  B  B  Microsoft  04/21/2019  B  Microsoft  04/21/2019  B  Check here if you have attached additional sheets  TIEM 7 SCH 150(8)  NAME OF BUSINESS  TILLEAND TERM OF OFFICE  COMPENSATION (enter amount or NONE)  Partner  None  None  None								
TIEM 5 NAME OF BUSINESS  NATURE OF BUSINESS  DATE OF TRANSFERRED DURING THIS DISCLOSURE PERIOD  NAME OF BUSINESS  DATE OF TRANSFERR  VALUE OF TRANSFER  VALUE OF TRANSFER  04/21/2019  B  B  Microsoft  04/21/2019  B  Microsoft  04/21/2019  B  Check here if you have attached additional sheets  TIEM 7 SCH 150(8)  NAME OF BUSINESS  TILLEAND TERM OF OFFICE  COMPENSATION (enter amount or NONE)  Partner  None  None  None								
TIEM 5 NAME OF BUSINESS  NATURE OF BUSINESS  DATE OF TRANSFERRED DURING THIS DISCLOSURE PERIOD  NAME OF BUSINESS  DATE OF TRANSFERR  VALUE OF TRANSFER  VALUE OF TRANSFER  04/21/2019  B  B  Microsoft  04/21/2019  B  Microsoft  04/21/2019  B  Check here if you have attached additional sheets  TIEM 7 SCH 150(8)  NAME OF BUSINESS  TILLEAND TERM OF OFFICE  COMPENSATION (enter amount or NONE)  Partner  None  None  None								
TIEM 5 NAME OF BUSINESS  NATURE OF BUSINESS  DATE OF TRANSFERRED DURING THIS DISCLOSURE PERIOD  NAME OF BUSINESS  DATE OF TRANSFERR  VALUE OF TRANSFER  VALUE OF TRANSFER  04/21/2019  B  B  Microsoft  04/21/2019  B  Microsoft  04/21/2019  B  Check here if you have attached additional sheets  TIEM 7 SCH 150(8)  NAME OF BUSINESS  TILLEAND TERM OF OFFICE  COMPENSATION (enter amount or NONE)  Partner  None  None  None								
NAME OF BUSINESS  NAME OF BUSINESS  NATURE OF BUSINESS  NATURE OF BUSINESS  NATURE OF INTEREST  Check here if entry is None  Check here if you have attached additional sheets  ITEM 6 ROCH 15(50X2)  OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD  NAME OF BUSINESS  DATE OF TRANSFER  O4/21/2019  B BORING  O4/22/2019  B O4/02/2019  B Microsoft  O4/21/2019  B Microsoft  O4/21/2019  B C Check here if entry is None  Check here if entry is None  Check here if you have attached additional sheets  TEM 7 RSCH 15(0)(3)  NAME OF BUSINESS  TITLE AND TERM OF OFFICE  (enter amount or NONE)  RAME OF BUSINESS  TITLE AND TERM OF OFFICE  NONE  NONE  NONE  NONE  NONE  NONE  NONE  NONE	<b>_</b>	Check here if entry is None	Check here if you	eck here if you have attached additional sheets				
OR NO. OF SHARES  ITEM 5 DISCLOSURE PERIOD  OR NO. OF SHARES  OR NO. OF SHARES  ITEM 5 DISCLOSURE PERIOD  OR NO. OF SHARES  OR NO. OF SHARES  ITEM 5 DISCLOSURE PERIOD  OR NO. OF SHARES  OR NO. OF SHARES  ITEM 5 DISCLOSURE PERIOD  OR NO. OF SHARES  OR NO. OF SHARES  ITEM 5 DISCLOSURE PERIOD  OR NO. OF SHARES  OR NO. OF SHARES  ITEM 5 DISCLOSURE PERIOD  OR NO. OF SHARES  OR NO. OF SHARES  OR NO. OF SHARES  ITEM 5 DISCLOSURE PERIOD  OR NO. OF SHARES  OR NO. OR N						ATE, HA	VING A	
TEM 6 RECH 15(d)(2)   OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD		NAME OF BUSINESS	NATU	RE OF BUSINESS	NATURE OF INTERE	ST		
TEM 6 RECH 15(d)(2)   OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD								
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TEM 6 RECH 15(d)(2)   OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD								
NAME OF BUSINESS  DATE OF TRANSFER  VALUE OF TRANSFER  Cisco  04/21/2019  B  Boeing  04/02/2019  E  IBM  04/21/2019  B  Microsoft  04/21/2019  C  Qualcomm  10/07/2019  B  Check here if entry is None  Check here if you have attached additional sheets  ITEM 7 RSCH 15(d/3)  ILIST EACH OFFICERSHIP. DIRECTORSHIP. TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS.  NAME OF BUSINESS  TITLE AND TERM OF OFFICE  COMPENSATION (enter amount or NONE)  None  C&G Apartments  Partner  None		Check here if entry is None	✓ Check here if you	have attached additional sh	neets			
Cisco  O4/21/2019  B  Boeing  O4/02/2019  E  IBM  O4/21/2019  B  Microsoft  O4/21/2019  C  Qualcomm  O4/21/2019  B  Check here if entry is None  Check here if you have attached additional sheets  ITEM 7 RSCH 15(d)(3)  ILIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS.  NAME OF BUSINESS  TITLE AND TERM OF OFFICE  COMPENSATION (enter amount or NONE)  Goodsill Anderson Quinn and Stifel  Partner  None  C&G Apartments  None								
Boeing 04/02/2019 E  IBM 04/21/2019 B  Microsoft 04/21/2019 C  Qualcomm 10/07/2019 B  Check here if entry is None Check here if you have attached additional sheets  ITEM 7 RSCH 15(d)(3) LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS.  NAME OF BUSINESS TITLE AND TERM OF OFFICE COMPENSATION (enter amount or NONE)  Goodsill Anderson Quinn and Stifel Partner None  C&G Apartments Partner None	Cisco	NAME OF BUSINESS			VALUE		ANSFER	
IBM 04/21/2019 B  Microsoft 04/21/2019 C  Qualcomm 10/07/2019 B  Check here if entry is None Check here if you have attached additional sheets  ITEM 7 RSCH 15(d)(3) LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS.  NAME OF BUSINESS TITLE AND TERM OF OFFICE COMPENSATION (enter amount or NONE)  Goodsill Anderson Quinn and Stifel Partner None  C&G Apartments Partner None								
Microsoft  Qualcomm  10/07/2019  B  Check here if entry is None Check here if you have attached additional sheets  ITEM 7 RSCH 15(d)(3)  NAME OF BUSINESS  NAME OF BUSINESS  TITLE AND TERM OF OFFICE COMPENSATION (enter amount or NONE)  Partner  None  Case Apartments  Partner  None	_							
Qualcomm    10/07/2019   B								
ITEM 7 RSCH 15(d)(3)  NAME OF BUSINESS  NAME OF BUSINESS  TITLE AND TERM OF OFFICE  Goodsill Anderson Quinn and Stifel  C&G Apartments  Partner  None  Partner  None	Qualcomm		1					
NAME OF BUSINESS  TITLE AND TERM OF OFFICE  COMPENSATION (enter amount or NONE)  Partner  None  C&G Apartments  Partner  None								
NAME OF BUSINESS  TITLE AND TERM OF OFFICE  COMPENSATION (enter amount or NONE)  Partner  None  C&G Apartments  Partner  None								
Goodsill Anderson Quinn and Stifel Partner None C&G Apartments Partner None								
	Goodsill Anderson Quinn and Stifel			Partner		,		
	C&G Apartments			Partner			None	
Check here if entry is None Check here if you have attached additional sheets		Check here if entry is None	Check here if you	have attached additional sh	neets			

JUD 101 (01/2020) Page 2

ITEM 8 RSCH 15(d)(4)		TORS, OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE ST CREDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE.					
	NAME AND ADDRES	SS OF CREDITOR		ORIGINAL AMOUNT	OWED	AMOL	JNT OWED AT END OF YEAR
<b></b>	Check here if entry is N	one Chec	ck here if you h	ave attached additional shee	ts		
ITEM 9 RSCH 15(d)(5)		N THE STATE IN WHICH IS F				0,000 OR	MORE.
K30H 13(4)(3)		POSTAL ZIP CODE OF LO	CATION				VALUE
96821							К
96814							К
96817							J
	Check here if entry is N	one Chec	ck here if you h	ave attached additional shee	ts		
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE O	F WHICH EXC	EEDS \$10,000. ACQUIRED	DURING THE D	DISCLOSU	JRE PERIOD.
POSTAL ZIP C	ODE OF LOCATION	NATURE OF INTEREST		E AND ADDRESS OF PERS SIDERATION	ON RECEIVING	3	CONSIDERATION GIVEN
✓ Check here if entry is None Check here if you have attached additional sheets							
ITEM 11 RSCH 15(d)(5)  REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000, TRANSFERRED DURING THE DISCLOSURE PERIOD.							
	ODE OF LOCATION	NAME AND ADDRESS O	F PERSON F	JRNISHING CONSIDERATION	ON		CONSIDERATION RECEIVED
	Check here if entry is N	one Chec	ck here if you h	ave attached additional shee	ts		

JUD 101 (01/2020) Page 3

ITEM 12 RSCH 15(d)(6)	CREDITOR INTEREST IN INSOLVENT BUSINESS HAVING A VALUE OF \$5,000 OR MORE.						
	NAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE			
<b>√</b> (	Check here if entry is None	Check here if you have attached additional sheets					
ITEM 13 RSCH 15(d)(7); Rule 3. 13 Revised Code of Judicial Conduct	GIFT(S) THAT MUST BE REPORTED	GIFT(S) THAT MUST BE REPORTED UNDER RULE 3. 13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.					
	SOURCE	DESCRIPTION	N OF GIFT	ESTIMATED VALUE			
	Check here if entry is None	Check here if you have attached addi	itional sheets				
ITEM 14 RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED JU	DICIAL EDUCATION					
I attended25 hours of Approved Judicial Education during the reporting period.							
REMARKS:							
✓ See attached sheets.							
CERTIFICATION: I hereby certiffy that the above is a true, correct, and complete statement.							
SIGNATURE: /	s/ Bert I. Ayabe		DATE:	04/30/2020			
NOTE: This f	iling is not valid without a signature.						

JUD 101 (01/2020) Page 4

Electronically Filed Supreme Court SCFD-11-0000179 30-APR-2020 12:18 PM

## **Financial Disclosure Statement 20**<u>19</u>

Attachment(s)

Submitted by: Bert I. Ayabe

## **EXHIBIT A**

Item 5

EACH OWNERSHIP OR BENEFICIAL INTEREST, HELD IN ANY BUSINESS CARRYING ON BUSINESS IN THE STATE, HAVING A VALUE OF \$5000 OR MORE EQUAL TO 10% OF THE OWNERSHIP OF THE BUSINESS

Name of Business	Nature of Business	Nature of Interest	Enter amount or No. of shares
C & G Apartments	Apartment Rental	Partner	50%
Boeing	Airlines	Stock	E
Cisco Systems	Technology	Stock	D
Johnson & Johnson	Pharmaceuticals	Stock	D
Microsoft Corp.	Technology	Stock	D
O'Reilly Automotive	Auto Parts Sale	Stock	D
PVH Corp.	Apparel	Stock	D
Qualcomm Inc.	Technology	Stock	D
Tapestry, Inc.	Luxury Lifestyle Products	Stock	D
Tractor Supply Co.	Retail Sales	Stock	D