



SUPREME COURT CLERK'S OFFICE
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HONOLULU, HAWAII 96813-2912

FINANCIAL DISCLOSURE STATEMENT

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**Electronically Filed
Supreme Court
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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 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)

<p>NAME: <u>Taniyama</u> <u>Kimberly</u> <u>Bryn Mari</u> (LAST) (FIRST) (MIDDLE)</p> <p>OFFICE ADDRESS: <u>81-6627 Mamalahoa Hwy., Suite 109</u> NUMBER, STREET</p> <p>CITY OR TOWN: <u>Kealahou</u> ZIP CODE: <u>96750</u></p>	<p>NAME OF SPOUSE OR DOMESTIC PARTNER: <u>Chad Taniyama</u></p> <p>No. of Dependent Children: (Do not include names) <u>3</u></p>	
<p>JUDICIAL POSITION HELD <u>Per Diem Judge</u></p>	<p>DATE OF APPOINTMENT <u>March 18, 2019</u></p>	<p>OFFICE PHONE <u>808-323-2100</u></p>

CALENDAR YEAR COVERED BY THIS DISCLOSURE: 2019

ITEM RSCH 15(d)(1)	DESCRIPTION	ANNUAL INCOME								
1	JUDICIAL COMPENSATION	D								
2	JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,000)									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 45%;">EMPLOYER/LAW FIRM</th> <th style="width: 45%;">BUSINESS ADDRESS</th> <th style="width: 10%;">ANNUAL INCOME</th> </tr> </thead> <tbody> <tr> <td>The Law Office of Kimberly B. Taniyama, LLC</td> <td>81-6627 Mamalahoa Hwy., Suite 109 Kealahou, HI 96750</td> <td>E</td> </tr> </tbody> </table>	EMPLOYER/LAW FIRM	BUSINESS ADDRESS	ANNUAL INCOME	The Law Office of Kimberly B. Taniyama, LLC	81-6627 Mamalahoa Hwy., Suite 109 Kealahou, HI 96750	E			
EMPLOYER/LAW FIRM	BUSINESS ADDRESS	ANNUAL INCOME								
The Law Office of Kimberly B. Taniyama, LLC	81-6627 Mamalahoa Hwy., Suite 109 Kealahou, HI 96750	E								
3	INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if income for services rendered exceeds \$1,000)									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 75%;">EMPLOYER</th> <th style="width: 25%;">ANNUAL INCOME</th> </tr> </thead> <tbody> <tr> <td>County of Hawaii</td> <td>F</td> </tr> <tr> <td>Hawaii Precast, Inc.</td> <td>B</td> </tr> <tr> <td>Waikoloa Resort Assn.</td> <td>B</td> </tr> </tbody> </table>	EMPLOYER	ANNUAL INCOME	County of Hawaii	F	Hawaii Precast, Inc.	B	Waikoloa Resort Assn.	B	
EMPLOYER	ANNUAL INCOME									
County of Hawaii	F									
Hawaii Precast, Inc.	B									
Waikoloa Resort Assn.	B									

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
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SOURCE	NATURE OF SERVICES RENDERED	AMOUNT

Check here if entry is None Check here if you have attached additional sheets

ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL INTEREST, HELD IN ANY BUSINESS CARRYING ON BUSINESS IN THE STATE, HAVING A VALUE OF \$5,000 OR MORE OR EQUAL TO 10% OF THE OWNERSHIP OF THE BUSINESS.
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NAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	ENTER AMOUNT OR NO. OF SHARES
The Law Office of Kimberly B. Taniyama, LLC	legal services	member	100%

Check here if entry is None 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
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NAME OF BUSINESS	DATE OF TRANSFER	VALUE OF TRANSFER

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.
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NAME OF BUSINESS	TITLE AND TERM OF OFFICE	COMPENSATION (enter amount or NONE)

Check here if entry is None Check here if you have attached additional sheets

ITEM 8 RSCH 15(d)(4)	LIST CREDITORS, OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE PERIOD. LIST CREDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE.		
	ORIGINAL AMOUNT OWED	AMOUNT OWED AT END OF YEAR	
Discover, P.O. Box 6103, Carol Stream, IL 60197	C	C	
USAA, 10750 McDermott Fwy, San Antonio, TX 78288	C	C	
USAA, 8950 Cypress Waters Blvd, Suite B, Coppell, TX 75019	D	D	
FHB, P.O. Box 29450, Honolulu, HI 96820	D	D	
FHB, P.O. Box 29450, Honolulu, HI 96820	B	C	

Check here if entry is None Check here if you have attached additional sheets

ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN THE STATE IN WHICH IS HELD AN INTEREST WITH A FAIR MARKET VALUE OF \$10,000 OR MORE.	
	POSTAL ZIP CODE OF LOCATION	VALUE
96740		K

Check here if entry is None Check here if you have attached additional sheets

ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000. ACQUIRED DURING THE DISCLOSURE PERIOD.			
	NATURE OF INTEREST	NAME AND ADDRESS OF PERSON RECEIVING CONSIDERATION	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.		
	NAME AND ADDRESS OF PERSON FURNISHING CONSIDERATION	CONSIDERATION RECEIVED	

Check here if entry is None Check here if you have attached additional sheets

ITEM 12 CREDITOR INTEREST IN INSOLVENT BUSINESS HAVING A VALUE OF \$5,000 OR MORE.
RSCH 15(d)(6)

NAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE

Check here if entry is None Check here if you have attached additional sheets

ITEM 13 GIFT(S) THAT MUST BE REPORTED UNDER RULE 3. 13(c) OF THE HAWAII REVISED CODE OF JUDICIAL CONDUCT.
RSCH 15(d)(7);
Rule 3. 13
Revised Code
of Judicial
Conduct

SOURCE	DESCRIPTION OF GIFT	ESTIMATED VALUE

Check here if entry is None Check here if you have attached additional sheets

ITEM 14 FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION
RSCH 15(d)(8)
& 22(h)

I attended 9 hours of Approved Judicial Education during the reporting period.

REMARKS:

See attached sheets.

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

SIGNATURE: /s/ Kimberly Taniyama

DATE: April 9, 2020

NOTE: This filing is not valid without a signature.