



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

FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

**Electronically Filed
Supreme Court
SCFD-11-0000269
01-MAY-2023
02:20 PM
Dkt. 46 FDS**

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>Recktenwald Mark E.</u> (LAST) (FIRST) (MIDDLE)</p> <p>OFFICE ADDRESS: <u>417 S. King Street</u> NUMBER, STREET</p> <p>CITY OR TOWN: <u>Honolulu</u> ZIP CODE: <u>96813</u></p>	<p>NAME OF SPOUSE OR DOMESTIC PARTNER: <u>Gailynn Williamson</u></p> <p>No. of Dependent Children: (Do not include names) <u>0</u></p>	
<p>JUDICIAL POSITION HELD Chief Justice</p>	<p>DATE OF APPOINTMENT 09/14/2020</p>	<p>OFFICE PHONE 808-539-4701</p>

CALENDAR YEAR COVERED BY THIS DISCLOSURE: 2022

ITEM 1 RSCH 15(d)(1)	JUDICIAL COMPENSATION	ANNUAL INCOME G
-------------------------	-----------------------	---------------------------

ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,000)	
-------------------------	---	--

EMPLOYER/LAW FIRM	BUSINESS ADDRESS	ANNUAL INCOME

ITEM 3 RSCH 15(d)(1)	INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if income for services rendered exceeds \$1,000)	
-------------------------	--	--

EMPLOYER	ANNUAL INCOME
Employees' Retirement System of the State of Hawaii	D
Social Security	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	NATURE OF SERVICES RENDERED	AMOUNT
Office of Personnel Management	annuity for prior federal employment	C

 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.
-------------------------	--

NAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	ENTER AMOUNT OR NO. OF SHARES
Please see attachment			

 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
-------------------------	---

NAME OF BUSINESS	DATE OF TRANSFER	VALUE OF TRANSFER
Please see attachment		

 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)

 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.	
NAME AND ADDRESS OF CREDITOR Please see attachment	ORIGINAL AMOUNT OWED	AMOUNT OWED AT END OF YEAR

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 Please see attachment	VALUE	

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.		
POSTAL ZIP CODE OF LOCATION	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.	
POSTAL ZIP CODE OF LOCATION	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
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
------------------	--------------------	--------------------	-------

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 UNDER RULE 3. 13(c) OF THE HAWAII REVISIED 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
RSCH 15(d)(8)
& 22(h) FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION

I attended 18.00 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/ Mark E. Recktenwald

DATE: 05/01/2023

NOTE: This filing is not valid without a signature.