TT			URT CLERK TH KING STRE HAWAI'I 9681	ET	FINA	THIS SPAC	SCLOSURE STATEMENT E FOR OFFICE USE ONLY ectronically Filed preme Court	
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 \$1,000G - At least \$150,000 but less than \$250,000B - At least \$1,000 but less than \$10,000H - At least \$250,000 but less than \$500,000C - At least \$10,000 but less than \$25,000I - At least \$250,000 but less than \$750,000D - At least \$25,000 but less than \$50,000J - At least \$750,000 but less than \$1,000,000E - At least \$50,000 but less than \$100,000K -\$1,000,000 or moreF - At least \$100,000 but less than \$150,000K -\$1,000,000 or more						SCFD-11-0000244 22-APR-2024 01:50 PM Dkt. 38 FDS		
TO BE FILE	D BY ALL FULL TIME AND	PER DIEM JUDGES.						
				be only)				
McKe	enna	Sabrin		Shizue		NAME OF SPO	OUSE OR DOMESTIC PARTNER:	
(I	LAST)	(FIF	RST)	(MIDDLE)				
OFFICE ADDRES	417 S. King S	t.				No. of Depende	ent Children:	
CITY OR TOWN:	Honolulu	NUMBER, STREE		96813 E:		(Do not include names)		
JUDICIAL POSITIO			APPOINTMENT		OFFICE PH			
Associate Jus		DATE OF	3/3/2	2011	OFFICE FI	80853	94735	
		0000						
CALENDAR YEAR	R COVERED BY THIS DISC	CLOSURE: 20 <u>23</u>						
ITEM 1 RSCH 15(d)(1)	JUDICIAL COMPENS	SATION					ANNUAL INCOME G	
ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER IN (if income for service:		1,000)					
,	EMPLOYER/LA	W FIRM		BUSINESS	ADDRESS		ANNUAL INCOME	
n/a								
ITEM 3 RSCH 15(d)(1)	INCOME OF SPOUS (if income for services	s rendered exceeds \$	1,000)	PENDENT CHILDREN			1	
,		E	MPLOYER				ANNUAL INCOME	
n/a								

Page 1

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		Ν	ATURE OF SERVICES RE	ENDERED	AMOUNT	
	Check here if entry is None			ave attached additional sho			
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL VALUE OF \$5,000 OR MORE OR EQU					TE, HAVING A	
ITEM 6 RSCH 15(d)(2)	NAME OF BUSINESS Check here if entry is None OWNERSHIP OR BENEFICIAL INTER NAME OF BUSINESS		here if you h	RE OF BUSINESS ave attached additional she ANSFERRED DURING TH E OF TRANSFER	IS DISCLOSURE PERIOD	ST ENTER AMOUNT OR NO. OF SHARES	
Check here if entry is None Check here if you have attached additional sheets							
ITEM 7 RSCH 15(d)(3)							
	NAME OF BUSINESS			TITLE AND TE	RM OF OFFICE	COMPENSATION (enter amount or NONE)	
	Check here if entry is None	Check	here if you h	ave attached additional sh	eets		

ITEM 8 RSCH 15(d)(4)		OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE EDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE.							
	NAME AND ADDRESS OF CREDITOR	AMOUNT OWED AT END OF YEAR							
First Hawaiia	n Bank, 999 Bishop St, Honolulu 96813	K							
American Sa	vings Bank, 1001 Bishop St., Honolulu 9681	3 A	D						
	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 \$1	0,000 OR MORE.						
	POSTAL ZIP CODE OF LOCATI	ION	VALUE						
96816			К						
96816			К						
96816			I						
Check here if entry is None Check here if you have attached additional sheets									
ITEM 10 RSCH 15(d)(5)									
POSTAL ZIP C	ODE OF LOCATION NATURE OF INTEREST	NAME AND ADDRESS OF PERSON RECEIVING CONSIDERATION	G 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 RECEIVE									
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 addit	ional sheets					
ITEM 13 RSCH 15(d)(7); Rule 3. 13 Revised Code of Judicial	GIFT(S) THAT MUST BE REPORTED UNDER RULE 3. 13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.							
Conduct								
	SOURCE	DESCRIPTIO	ESTIMATED VALUE					
	Check here if entry is None	Check here if you have attached addit	ional sheets					
ITEM 14 RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION							
I attended <u>33.5</u> 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/ Sabrina S. McKenna

DATE: 4/22/2024

NOTE: This filing is not valid without a signature.