



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-15-0000087  
29-FEB-2024  
11:00 AM  
Dkt. 19 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)

|   |   |   |   |
|---|---|---|---|
| NAME: <u>Kelley</u><br><small>(LAST)</small>  | NAME: <u>Fredrick</u><br><small>(FIRST)</small> | NAME: <u>M</u><br><small>(MIDDLE)</small> | NAME OF SPOUSE OR DOMESTIC PARTNER:<br><br><u>Jennifer Kelley</u>                   |
| OFFICE ADDRESS: <u>24 N. Church St., Suite 312</u><br><small>NUMBER, STREET</small> |   |   | No. of Dependent Children:<br><small>(Do not include names)</small><br><br><u>3</u> |
| CITY OR TOWN: <u>Wailuku</u>  | ZIP CODE: <u>96793</u>                          |   |   |
| JUDICIAL POSITION HELD<br><u>Per Diem District / Family</u>                         | DATE OF APPOINTMENT<br><u>6/2/2014</u>          | OFFICE PHONE<br><u>808-244-4994</u>       |   |

CALENDAR YEAR COVERED BY THIS DISCLOSURE: 2023

|                       |   |   |  |
|-----------------------|---|---|--|
| ITEM<br>RSCH 15(d)(1) | 1 | JUDICIAL COMPENSATION   | ANNUAL INCOME<br><br>C   |
| ITEM<br>RSCH 15(d)(1) | 2 | JUDGE'S OTHER INCOME<br><small>(if income for services rendered exceeds \$1,000)</small>  |  |
|                       |   | EMPLOYER/LAW FIRM<br><u>Law Offices of Kelley &amp; Wilkins, LLLC</u>   | BUSINESS ADDRESS<br><u>24 N. Church St., Suite 312</u><br><br>ANNUAL INCOME<br><br>J |
| ITEM<br>RSCH 15(d)(1) | 3 | INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN<br><small>(if income for services rendered exceeds \$1,000)</small> |  |
|                       |   | EMPLOYER<br><u>State of Hawaii - Department of Education</u>  | ANNUAL INCOME<br><br>D   |

|                         |   |
|-------------------------|---|
| ITEM 4<br>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 |
|--------|-----------------------------|--------|
|        |                             |        |

 Check here if entry is None

 Check here if you have attached additional sheets

|                         |  |
|-------------------------|--|
| ITEM 5<br>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 |
|-------------------------------|---------------------|--------------------|-------------------------------|
| Asset Recovery of Hawaii, LLC | Asset Recovery      | Member             | 50%                           |
| Maui Getaway, LLC             | Property Management | Member             | 100%                          |
| Hiehie, LLC                   | Property Management | Member             | 100%                          |
| DWMK, LLC                     | Investment          | Member             | 50%                           |

 Check here if entry is None

 Check here if you have attached additional sheets

|                         |   |
|-------------------------|---|
| ITEM 6<br>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 |
|------------------|------------------|-------------------|
|                  |                  |                   |

 Check here if entry is None

 Check here if you have attached additional sheets

|                         |  |
|-------------------------|--|
| ITEM 7<br>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) |
|-----------------------|--------------------------|-------------------------------------|
| The Kelley Foundation | President                | NONE                                |

 Check here if entry is None

 Check here if you have attached additional sheets

|                         |  |                      |                            |
|-------------------------|--|----------------------|----------------------------|
| ITEM 8<br>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   | 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<br>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 |
|                         | 96790   |  | K     |

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

|                          |  |                    |  |                     |
|--------------------------|--|--------------------|--|---------------------|
| ITEM 10<br>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<br>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<br>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<br>RSCH 15(d)(7);<br>Rule 3. 13<br>Revised Code<br>of Judicial<br>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<br>RSCH 15(d)(8)<br>& 22(h) | FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION |  |  |
|-------------------------------------|---|--|--|

I attended 4 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/ Fredrick Matson Kelley

DATE: 02/29/2024

NOTE: This filing is not valid without a signature.