

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

K -\$1,000,000 or more

G - At least \$150,000 but less than \$250,000

H - At least \$250,000 but less than \$500,000

J - At least \$750,000 but less than \$1,000,000

I - At least \$500,000 but less than \$750,000

FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

Electronically Filed Supreme Court SCFD-11-0000210 13-SEP-2024 12:12 PM Dkt. 40 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

TO BE FILED BY ALL FULL TIME AND PER DIEM JUDGES.

| (Type only) | | | | | | |
|-------------------------|--|-------------------------------|------------------|--------------|---------------------------|--|
| Gin | oza | Lisa | М | NAME OF SP | OUSE OR DOMESTIC PARTNER: | |
| IVAIVIL. | (LAST) | (FIRST) | (MIDDLE) | Brenda T | anaka | |
| OFFICE ADDR | dent Children: | | | | | |
| | e names) | | | | | |
| CITY OR TOW | Honolulu | ZIP COD | 96813 E: | 1 | | |
| JUDICIAL POS | ITION HELD | DATE OF APPOINTMENT | | OFFICE PHONE | | |
| Associate J | ustice | 01/12/ | 2024 | (808) 5 | (808) 539-4725 | |
| CALENDAR YE | EAR COVERED BY THIS DISCLOSURE | =: 20 <u>23</u> | | | | |
| ITEM 1 RSCH 15(d)(1) | JUDICIAL COMPENSATION | | | | ANNUAL INCOME | |
| RSCH 15(d)(1) | ODDIOIAE COMI ENGLATION | | | | G | |
| ITEM 2 RSCH 15(d)(1) | JUDGE'S OTHER INCOME (if income for services render | ed exceeds \$1,000) | | | | |
| | EMPLOYER/LAW FIRM | | BUSINESS AL | DDRESS | ANNUAL INCOME | |
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| ITEM 3 | | OMESTIC PARTNER AND DE | PENDENT CHILDREN | | | |
| RSCH 15(d)(1) | (if income for services render | ed exceeds \$1,000) EMPLOYER | | | ANINIHAL INIOOME | |
| The Food C | ANNUAL INCOME E | | | | | |
| The Food Company | | | | | | |
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| 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 | | N | ATURE OF SERVICES RE | ENDERED | | AMOUNT |
| ~ C | Check here if entry is None | Check he | re if you h | ave attached additional sh | neets | | |
| ITEM 5 RSCH 15(d)(2) | EACH OWNERSHIP OR BENEFICIAL I VALUE OF \$5,000 OR MORE OR EQU | | | | | TE, HA | VING A |
| NAME OF BUSINESS The Food Company | | Rest | NATURE OF BUSINESS Restaurant | | NATURE OF INTEREST Owner (B. Tanaka) | | ENTER AMOUNT OR NO. OF SHARES 100% |
| c | Check here if entry is None | ✓ Check her | re if you h | ave attached additional sh | eets | | |
| ITEM 6 RSCH 15(d)(2) | OWNERSHIP OR BENEFICIAL INTERI | EST UNDER IT | EM 5 TRA | ANSFERRED DURING TH | IIS DISCLOSURE PERIOD | | |
| | NAME OF BUSINESS | | DATE | OF TRANSFER | VALUE (| OF TRA | NSFER |
| 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. | | | | | | | |
| The Food Con | NAME OF BUSINESS | | | TITLE AND TE | RM OF OFFICE | | PENSATION amount or NONE) None |
| Check here if entry is None Check here if you have attached additional sheets | | | | | | | |

JUD 101 (01/2020) Page 2

| 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 | ORIGINAL AMOUNT OWE | D AMC | OUNT OWED AT END OF YEAR | | | |
| Bank of Hawa | aii | С | | Α | | | |
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| | Check here if entry is None Check he | re 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 VALU | E OF \$10,000 OF | R MORE. | | | |
| | POSTAL ZIP CODE OF LOCAT | ION | | VALUE | | | |
| 96734 | | | | K | | | |
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| | Check here if entry is None Check he | re if you have attached additional sheets | | | | | |
| ITEM 10 RSCH 15(d)(5) | REAL PROPERTY, THE FAIR MARKET VALUE OF W | HICH EXCEEDS \$10,000. ACQUIRED DURIN | IG THE DISCLOS | SURE PERIOD. | | | |
| POSTAL ZIP C | ODE OF LOCATION NATURE OF INTEREST | NAME AND ADDRESS OF PERSON RE | CEIVING | CONSIDERATION GIVEN | | | |
| | | CONSIDERATION | | | | | |
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| ✓ Check here if entry is None Check here if you have attached additional sheets | | | | | | | |
| ITEM 11 REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000, TRANSFERRED DURING THE DISCLOSURE PERIOD. | | | | | | | |
| RSCH 15(d)(5) POSTAL ZIP CODE OF LOCATION NAME AND ADDRESS OF PERSON FURNISHING CONSIDERATION CONSIDERATION RECE | | | | | | | |
| FOSTAL ZIF CO | CONSIDERATION RECEIVED | | | | | | |
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| | Check here if entry is None Check he | re if you have attached additional sheets | | | | | |

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 | | | |
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| √ C | 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 HAWAI'I REVISED CODE OF JUDICIAL CONDUCT. | | | | | | |
| | SOURCE | DESCRIPTION | ESTIMATED VALUE | | | | |
| Kanoe Keahi | | Hawaiian wall-flag | | \$80-120 | | | |
| | | | | | | | |
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| С | heck here if entry is None | Check here if you have attached addi | tional sheets | | | | |
| ITEM 14 RSCH 15(d)(8) & 22(h) | RSCH 15(d)(8) FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION | | | | | | |
| I attended 10.00 hours of Approved Judicial Education during the reporting period. | | | | | | | |
| REMARKS: | | | | | | | |
| PI | ease note that Item 13 has bee | n amended since filing the 2023 Fi | nancial Disclosure Statement or | n April 16, 2024. | | | |
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| See attached sheets. | | | | | | | |
| CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement. | | | | | | | |
| SIGNATURE: /s | / Lisa M. Ginoza | | DATE: | 09/13/2024 | | | |
| | | | | | | | |
| NOTE: This filing is not valid without a signature. | | | | | | | |

JUD 101 (01/2020) Page 4