

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

FINANCIAL DISCLOSURE

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Electronically Filed Supreme Court SCFD-11-0000269 30-APR-2025 01:02 PM Dkt. 54 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

- F At least \$100,000 but less than \$150,000
- E At least \$50,000 but less than \$100,000
- 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:		Recktenwald (LAST)		Mark	E.	NAME (NAME OF SPOUSE OR DOMESTIC PARTNER:	
NAIVIE.				(FIRST)	(MIDDLE)	Gaily	nn Williamson	
OFFICE	E ADDRES	417 s:	S. King Street				ependent Children:	
			NUMI	BER, STREET		(Do not	include names)	
CITY OF	R TOWN:	Honol	ulu	ZIP COD	96813 E:	0		
JUDICIA	AL POSITIO	ON HELD		DATE OF APPOINTMENT		OFFICE PHONE		
Chief J	Justice			09/14/2010		(808) 539-4701		
CALEN	CALENDAR YEAR COVERED BY THIS DISCLOSURE: 2024							
ITEM RSCH 1	1 5(d)(1)	JUDICIA	AL COMPENSATION				ANNUAL INCOME	
- KSCH I	3(d)(1)						G	
ITEM RSCH 1	2 5(d)(1)		'S OTHER INCOME ne for services rendered	exceeds \$1,000)				
		EM	IPLOYER/LAW FIRM		BUSINESS A	DDRESS	ANNUAL INCOME	
		INICOM		MESTIC PARTNER AND DE				
ITEM RSCH 1	3 5(d)(1)		ne for services rendered		PENDENT CHILDREN			
				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			ENDERED	AMOUNT	
Office of Personnel Management			annuity for prior federal employment				С
	Check here if entry is None	Check here if you have attached additional sheets					
ITEM 5 RSCH 15(d)(2)		NTEREST, HELD IN ANY BUSINESS CARRYING C AL TO 10% OF THE OWNERSHIP OF THE BUSINE					
	NAME OF BUSINESS		NATUI	RE OF BUSINESS	NATURE OF INTERE	ST	ENTER AMOUNT OR NO. OF SHARES
Please see at	tachment						
	Check here if entry is None	✓ Cł	neck here if you h	ave attached additional sh	eets		
ITEM 6 RSCH 15(d)(2)	OWNERSHIP OR BENEFICIAL INTER	EST UN	DER ITEM 5 TRA	ANSFERRED DURING TH	IS DISCLOSURE PERIOD		
	NAME OF BUSINESS		DATE	OF TRANSFER	VALUE	OF TRA	NSFER
Please see attachment							
	Check here if entry is None	C C	heck here if you h	ave attached additional sh	eets		
TEM 7 RSCH 15(d)(3)	ITEM 7 RSCH 15(d)(3) LIST EACH OFFICERSHIP, DIRECTORSHIP, T			FRUSTEESHIP OR OTHER FIDUCIARY RELA		' BUSINE	ESS.
NAME OF BUSINESS			TITLE AND TERM OF OFFIC		RM OF OFFICE		PENSATION amount or NONE)
							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
✓ Check here if entry is None			heck here if you h	ave attached additional sh	eets		

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ITEM 8 RSCH 15(d)(4)		DITORS, OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE LIST CREDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE.					
	NAME AND ADDRES	S OF CREDITOR		ORIGINAL AMOUNT OWED) AMC	OUNT OWED AT END OF YEAR	
Please see attachment							
	Check here if entry is No	one Chec	ck here if you h	ave attached additional sheets			
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN	I THE STATE IN WHICH IS H	ELD AN INTER	REST WITH A FAIR MARKET VALUE	E OF \$10,000 OR	MORE.	
		POSTAL ZIP CODE OF LO	CATION			VALUE	
Please see a	ttachment						
	Check here if entry is No	one Chec	k here if you h	ave attached additional sheets			
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE O	F WHICH EXC	EEDS \$10,000. ACQUIRED DURIN	G THE DISCLOS	URE PERIOD.	
POSTAL ZIP C	ODE OF LOCATION	NATURE OF INTEREST		AME AND ADDRESS OF PERSON RECEIVING CONSIDERATION GIONSIDERATION			
	Check here if entry is No	one Chec	k here if you h	ave attached additional sheets		<u> </u>	
ITEM 11 REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000, TRANSFERRED DURING THE DISCLOSURE PERIOD.							
POSTAL ZIP C	ODE OF LOCATION	NAME AND ADDRESS O	F PERSON FL	JRNISHING CONSIDERATION		CONSIDERATION RECEIVED	
	Check here if entry is No	one Chec	ck here if you h	ave attached additional sheets			

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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	GIFT(S) THAT MUST BE REPORTED UNDER RULE 3. 13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.						
Conduct	SOURCE	DESCRIPTION	N OF GIFT	ESTIMATED VALUE			
	Check here if entry is None	Check here if you have attached addi	tional sheets				
ITEM 14 RSCH 15(d)(8) & 22(h)	14						
I attended20.50_ 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:	04/30/2025			
NOTE: This filling is not valid without a signature.							

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