



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-25-0000369
28-APR-2026
09:55 AM
Dkt. 3 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: Dowd <small>(LAST)</small>	NAME: Kyle <small>(FIRST)</small>	NAME: Timothy <small>(MIDDLE)</small>	NAME OF SPOUSE OR DOMESTIC PARTNER: Mary Grace A. Matias-Dowd
OFFICE ADDRESS: 500 Ala Moana Blvd., Suite 7400 <small>NUMBER, STREET</small>			No. of Dependent Children: <small>(Do not include names)</small> 3
CITY OR TOWN: Honolulu, Hawai'i		ZIP CODE: 96813	

JUDICIAL POSITION HELD Per Diem District Family Court Judge	DATE OF APPOINTMENT 04/16/2025	OFFICE PHONE (808) 766-3238
---	--	---------------------------------------

CALENDAR YEAR COVERED BY THIS DISCLOSURE: **2025**

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

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

EMPLOYER/LAW FIRM Law Office of Kyle T. Dowd, LLC	BUSINESS ADDRESS 500 Ala Moana Blvd., Suite 7400, HNL, HI	ANNUAL INCOME D
---	---	---------------------------

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

EMPLOYER IMUA Orthopedics, Sports & Health	ANNUAL INCOME D
EMPLOYER O&E Matias Electrical Services, LLC	ANNUAL INCOME C

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

 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
Law Office of Kyle T. Dowd, LLC	Legal services	Sole proprietorship	All

 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

 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	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	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 _____ 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/ Kyle T. Dowd

DATE: 04/28/2026

NOTE: This filing is not valid without a signature.