

PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828	PDC FORM F-1 (11/18)	PERSONAL FINANCIAL AFFAIRS STATEMENT	P M PDC OFFICE USE O A S T R K DATE FILED PDC R E C A P R 0 4 2 0 1 9 V E D
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Refer to instruction manual for detailed assistance and examples.

Deadlines: Incumbent elected and appointed officials -- by April 15.
 Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position.

SEND REPORT TO PUBLIC DISCLOSURE COMMISSION

DOLLAR CODE	AMOUNT
A	\$1 to \$4,499
B	\$4,500 to \$23,999
C	\$24,000 to \$47,999
D	\$48,000 to \$119,999
E	\$120,000 or more

Last Name	First	Middle Initial
Durkan	Jenny	A.

Names of immediate family members, including registered domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for details.

Mailing Address (Use PO Box or Work Address) *

Office of the Mayor, P.O. Box 94749

City	County	Zip + 4
Seattle	King	98124-4749

Filing Status (Check only one box.)

An elected or state appointed official filing annual report

Final report as an elected official. Term expired: _____

Candidate running in an election: month _____ year _____

Newly appointed to an elective office

Newly appointed to a state appointive office

Professional staff of the Governor's Office and the Legislature

Office Held or Sought

Office title: Mayor

County, city, district or agency of the office, name and number: City of Seattle

Position number: N/A

Term begins: 11/28/2017 ends: 12/31/2021

1 INCOME List each employer, or other source of income (pension, social security, legal judgment, etc.) from which you or a family member, including registered domestic partner, received \$2,400 or more during the period. Include stock options received during the reporting period that had a value of \$2,400 or more. (Report interest and dividends in Item 3.)

Show Self (S) Spouse (SP/DP) Dependent (D)	Name and Address of Employer or Source of Compensation	Occupation or How Compensation Was Earned	Amount: (Use Code)
S	City of Seattle P.O. Box 94749 Seattle, WA 98124	Mayor	E

Check Here if continued on attached sheet

2 REAL ESTATE List street address, assessor's parcel number, or legal description AND county for each parcel of Washington real estate with value of over \$12,000 in which you or a family member, including registered domestic partner, held a personal financial interest during the reporting period. (Show partnership, company, etc. real estate on F-1 supplement.)

Property Sold or Interest Divested	Assessed Value (Use Code)	Name and Address of Purchaser		Nature and Amount (Use Code) of Payment or Consideration Received	
Property Purchased or Interest Acquired		Creditor's Name/Address	Payment Terms	Security Given	Mortgage Amount - (Use Code) Original Current
All Other Property Entirely or Partially Owned S/2 E/2 NE SW FR 200-2281 Whidbey Island	E				0 0

Check here if continued on attached sheet

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS List bank and savings accounts, insurance policies, stock, bonds and other intangible property (including but not limited to stock options) held during the reporting period.

A. Name and address of each bank or financial institution in which you, a family member, including registered domestic partner, had an account over \$24,000 any time during the report period.	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
JPM Chase 1201 Third Avenue, Seattle, WA 98101	Checking & Savings	E	A
B. Name and address of each insurance company where you, a family member, including registered domestic partner, had a policy with a cash or loan value over \$24,000 during the period.			
C. Name and address of each company, association, government agency, etc. in which you, a family member, including registered domestic partner, owned or had a financial interest worth over \$2,400. Include stocks, bonds, ownership, retirement plan, IRA, notes, stock options, and other intangible property. If you, your spouse, registered domestic partner and/or dependents had decision making authority regarding individual assets/investments list each asset or investment, the value and any income amount. EXAMPLE: If you self-directed an investment account identify each stock or other asset in that account. Quinn Emanuel Defined Benefit Plan 600 University Street, Suite 2800 Seattle, WA 98101	Defined Benefit Plan	E	0

Check here if continued on attached sheet.

4 CREDITORS List each creditor you or a family member, including registered domestic partner, owed \$2,400 or more any time during the period. Don't include retail charge accounts, credit cards, or mortgages or real estate reported in Item 2.

Creditor's Name and Address	Terms of Payment	Security Given	AMOUNT (USE CODE)	
			Original	Present
Check here <input type="checkbox"/> if continued on attached sheet.				

5 Filers answer questions A thru D below. If the answer is YES to any of these questions, the F-1 Supplement must also be completed as part of this report. If all answers are NO and you are a candidate for state or local office, an appointee to a vacant elective office, or a state executive officer filling your initial report, no F-1 Supplement is required. Incumbent elected officials and state executive officers filing an annual financial affairs report also must answer question E. An F-1 Supplement is required of those officeholders unless all answers to questions A thru E are NO.

A. At any time during the reporting period were you, your spouse, registered domestic partner or dependents (1) an officer, director, general partner or trustee of any corporation, company, union, association, joint venture or other entity or (2) a partner or member of any limited partnership, limited liability partnership, limited liability company or similar entity including but not limited to a professional limited liability company? If yes, complete Supplement, Part A.

B. Did you, your spouse, registered domestic partner or dependents have an ownership of 10% or more in any company, corporation, partnership, joint venture or other business at any time during the reporting period? If yes, complete Supplement, Part A.

C. Did you, your spouse, registered domestic partner or dependents own a business at any time during the reporting period? If yes, complete Supplement, Part A.

D. Did you, your spouse, registered domestic partner or dependents prepare, promote or oppose state legislation, rules, rates or standards for compensation or deferred compensation (other than pay for a currently-held public office) at any time during the reporting period? If yes, complete Supplement, Part B.

E. **Only for Persons Filing Annual Report.** Regarding the receipt of items not provided or paid for by your governmental agency during the previous calendar year: 1) Did you, your spouse, registered domestic partner or dependents (or any combination thereof) accept a gift of food or beverages costing over \$50 per occasion? or 2) Did any source other than your governmental agency provide or pay in whole or in part for you, your spouse, registered domestic partner and/or dependents to travel or to attend a seminar or other training? Yes If yes to either or both questions, complete Supplement, Part C.

ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.

I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns.

I hold a local elected office. I have read and am familiar with RCW 42.17A.555 regarding the use of public facilities in campaigns.

*CANDIDATES: Do not use public agency addresses or telephone numbers for contact information.

CERTIFICATION: I certify under penalty of perjury that the information in this report is true and correct to the best of my knowledge. I acknowledge that the email address herein shall constitute the official address for communications with the commission and that I must notify the commission of any change to that address within ten days.

Jenny Durkan 4-3-19
Signature Date

Contact Telephone: (206) * 684-4000
Email: jenny.durkan@seattle.gov (Work)
Email: _____ (Home)*

FINANCIAL INSTITUTIONS CONTINUED

F-1

Name **DURKAN, JENNY A** Page **3**

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

A. Name and address of each bank or financial institution	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Wells Fargo 999 Third Avenue Seattle WA 98104	Checking & Savings	B	A

Check here If continued on attached sheet.

COMPANY, ASSOC., GOVERNMENT AGENCY CONTINUED

F-1

Name DURKAN, JENNY A

Page 4

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

C. Name and address of each company, association, government agency	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Merrill Lynch 401(k) & Profit Sharing 1215 4th Avenue Seattle WA 98161	Retirement Plan	E	0
Federal Thrift Savings Plan P.O. Box 385021 Birmingham AL 35238	Retirement Plan: G Fund -Govt Securities Inv Fund	E	0
The Riveter 1517 12th Avenue Seattle WA 98122	Private Investment	C	0
Wells Fargo Investment Advisors 777 108th Ave NE Bellevue WA 98004	IRA	E	0
Bessemer Trust 630 Fifth Ave New York NY 10111	Investment Management - Old Westbury Fund, Inc.	E	B
Bessemer Trust 630 Fifth Ave New York NY 10111	Cash & Short Term Money Market	E	B
Bessemer Trust 630 Fifth Ave New York NY 10111	Roth IRA - Old Westbury Fund, Inc.	E	A
Bessemer Trust 630 Fifth Ave New York NY 10111	Jenny Durkan, BENE of L Durkan IRA	D	A
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Money Market	D	A
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Costco Wholesale Co. (COST)	B	A
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Nanometrics Inc. (NANO)	B	0
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Energy Select Sector SPDR ETF (XLE)	B	A

Check here if continued on attached sheet.

COMPANY, ASSOC., GOVERNMENT AGENCY CONTINUED

F-1

Name DURKAN, JENNY A

Page 5

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

C. Name and address of each company, association, government agency	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	ETFS Gold Trust ETF (SGOL)	C	0
i(x) Investments 142 W 57th Street New York NY 10019	Private Investment	E	0

Check here if continued on attached sheet.



PUBLIC DISCLOSURE COMMISSION
 711 CAPITOL WAY RM 208
 PO BOX 40908
 OLYMPIA WA 98504-0908
 (360) 753-1111
 TOLL FREE 1-877-601-2828
 EMAIL: pdc@pdc.wa.gov

PDC FORM
F-1
 SUPPLEMENT
 (1/16)

SUPPLEMENT PAGE
 PERSONAL FINANCIAL AFFAIRS STATEMENT

PROVIDE INFORMATION FOR YOURSELF, SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD

Last Name Durkan	First Jenny	Middle Initial A.	DATE 4/1/2019
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OFFICE HELD, BUSINESS INTERESTS:

Provide the following information if, during the reporting period, you, your spouse, registered domestic partner or dependents

- (1) were an officer, director, general partner, trustee, or 10 percent or more owner of a corporation, non-profit organization, union, partnership, joint venture or other entity; and/or
- (2) were a partner or member of a limited partnership, limited liability partnership, limited liability company or similar entity, including but not limited to a professional limited liability company.

- Legal Name: Report name used on legal documents establishing the entity.
- Trade or Operating Name: Report name used for business purposes if different from the legal name.
- Position or Percent of Ownership: The office, title and/or percent of ownership held.
- Brief Description of the Business/Organization: Report the purpose, product(s), and/or the service(s) rendered.
- Payments from Governmental Unit: If the governmental unit in which you hold or seek office made payments to the business entity concerning which you're reporting, show the purpose of each payment and the actual amount received.
- Payments from Business Customers and Other Government Agencies: List each corporation, partnership, joint venture, sole proprietorship, union, association, business or other commercial entity and each government agency (other than the one you seek/hold office) which paid compensation of \$12,000 or more during the period to the entity. Briefly say what property, goods, services or other consideration was given or performed for the compensation.
- Washington Real Estate: Identify real estate owned by the business entity if the qualifications referenced below are met.

ENTITY NO. 1

Reporting For: Self Spouse
 Registered Domestic Partner Dependent

LEGAL NAME:

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
 Purpose of payments

Amount (actual dollars)
 \$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
 Agency name:

Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE
 Customer name:

Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

CONTINUE PARTS B AND C ON NEXT PAGE

Name **Jenny A. Durkan**

ENTITY NO. 2 Reporting For: Self Spouse
 Registered Domestic Partner Dependent

LEGAL NAME: POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
 Purpose of payments Amount (actual dollars)
 \$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
 Agency name: Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE
 Customer name: Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

B LOBBYING: List persons for whom you, or any immediate family member, including registered domestic partner, lobbied or prepared state legislation or state rules, rates, or standards for compensation or deferred compensation. Do not list pay from government body in which you are an elected official or professional staff member.

Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)
Check here <input type="checkbox"/> if continued on attached sheet		

C FOOD TRAVEL SEMINARS Complete this section if a source other than your own governmental agency paid for or otherwise provided all or a portion of the following items to you, your spouse, registered domestic partner or dependents, or a combination thereof: 1) Food and beverages costing over \$50 per occasion, excluding certain receptions as defined in WAC 390-20-020A; 2) Travel occasions; or 3) Seminars, educational programs or other training.

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
7/22-7/26/18	Bloomberg Harvard City Leadership Initiative New York, NY	Bloomberg Harvard City Leadership Initiative offers leadership and management training up to 40 mayors from around the world, and to two senior officials from each mayor's city who are most crucial to affecting organizational change. Over the course of a year, the program combines an intensive classroom experience with broader training and capacity-building to help each participating mayor and senior leader foster their professional growth and advance key capabilities within their city hall.	\$ 1,539.40	A
9/12/18-9/13/18	United Nations Foundation - Global Climate Action Summit San Francisco, CA	The Global Climate Action Summit brings leaders and people together from around the world to celebrate the extraordinary achievements of states, regions, cities, companies, investors and citizens with respect to climate action. It was also a franchised for deeper worldwide commitments and accelerated action from countries - supported by all sectors of society - that can put the globe on track to prevent dangerous climate change and realize the historic Paris Agreement.	\$830.28	A
Check here <input checked="" type="checkbox"/> if continued on attached sheet				

Information Continued

F-1 Supplement

Name **Jenny A. Durkan**

ENTITY NO. Reporting For: Self Spouse
 Registered Domestic Partner Dependent

LEGAL NAME: POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
 Purpose of payments Amount (actual dollars)
 \$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
 Agency name: Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE:
 Customer name: Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

B LOBBYING: (Continued)

Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)

C FOOD TRAVEL SEMINARS (continued)

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
10/27-10/29/2018	Aspen Institute American Cities Initiative - Detroit CityLab	A partnership between Bloomberg Philanthropies, the Aspen Institute and The Atlantic CityLab is the preeminent meeting of city leaders and top minds in urbanism and city planning, economics, education, art, architecture, public sector innovation, community development, and business-convened with the goal of creating scalable solutions to major challenges faced by cities everywhere.	\$ 1,235.00	A

Washington State Public Disclosure Commission

Personal Financial Affairs Statement

Reporting Modification Application Questionnaire, Instructions And Certification

June 2017

DATE FILED PDC

APR 11 2018

Application Questionnaire Instructions

COPY

The purpose of the Public Disclosure Act in chapter RCW 42.17A includes at RCW 42.17A.001(3):

"That the people shall be assured that the private financial dealings of their public officials, and of candidates for those offices, present no conflict of interest between the public trust and private interest."

The form for providing disclosures of financial affairs is the F-1 Personal Financial Affairs Statement. The Act also provides for a process to seek a modification or suspension of reporting some information. RCW 42.17A.110(10) states in part:

*"After hearing, by order approved and ratified by a majority of the membership of the commission, [the commission is empowered to] suspend or modify any of the reporting requirements of this chapter in a particular case if it finds that literal application of this chapter works a **manifestly unreasonable hardship** and if it also finds that the suspension or modification will not **frustrate the purposes of the chapter...***

... Any suspension or modification shall be only to the extent necessary to substantially relieve the hardship. The commission shall act to suspend or modify any reporting requirements only if it determines that facts exist that are clear and convincing proof of the findings required under this section." (Emphasis added).

Possible qualifications for modifications or suspensions (referred to collectively as "modifications") are found at RCW 42.17A.110(10) and WAC 390-28-100. Copies of these provisions and reporting requirements are on the PDC's website at www.pdc.wa.gov under "Laws and Rules." The *Personal Financial Affairs Disclosure Instructions* are also available on the website, under "Learn." Modifications, if granted by the Commission, cover only one reporting period. Another application must be made in the following years if you still need a modification.

PDC staff has implemented this application procedure for filers requesting an F-1 Reporting Modification from the Commission. This is designed to provide more uniform information to the Commission from filers seeking a modification, and to enable a quicker response to possible questions about a request from the Commission at the hearing. **Please fill out this Application Questionnaire prior to having a modification request taken to the Commission for consideration.** The blanks in this document will expand to accommodate your answers. **It is suggested that you review this entire Application Questionnaire first, before filling out your answers.**

✓ If you are requesting a modification, whether new or a renewal of an earlier request, please:

- (1) **Complete or review** your filed Personal Financial Affairs Statement (PDC Form F- 1) including Supplemental attachments (*except* for the information for which you are seeking a modification – leave the relevant sections or lines blank on the F-1 form at this time);
- (2) **Answer all questions (# 1 – # 9)** on this Application Questionnaire, unless otherwise directed below,
- (3) **Confirm whether you authorize the PDC to use email may correspond with you about your request by email:**
- (4) **Sign the Certification,** and
- (5) **Return** this Application Questionnaire to the PDC via e-mail, mail, fax or other delivery (and also send the original of the Certification to the PDC).

- Please note, however, that while this Application Questionnaire for filers seeking a modification can be returned to the PDC in several ways, **F-1 forms cannot be filed by fax or e-mail.** See filing instructions in the *Personal Financial Affairs Statement Instruction Manual*.

✓ **Other items to consider:**

- Filers for which a PDC Rule may apply. As noted, the Commission has Rules for specific filers that are requesting modifications. Those filers include attorneys, automobile dealers, judges and judicial candidates, and spouses of elected and appointed officials, and also include candidates for public office. If you qualify as a filer under a specific Rule, please review the applicable Interpretation and provide the information pursuant to the specific Rule as part of your F-1 or F-1 Supplement forms. Copies of the Rules are available on the PDC website at www.pdc.wa.gov under “Learn” then “Laws & Rules.”
- Competitive disadvantage. If you are claiming a competitive disadvantage (in disclosing information), you must describe in detail the competitive environment in which the entity operates and explain how disclosure would likely affect the competitive position of the entity.

✓ **Please carefully review your F-1 and/or F-1 Supplement to ensure each form is fully completed.** Here are some commonly overlooked areas:

- Do you make the buy and sell decisions with regard to the IRA’s, stocks and other securities listed as retirement or income generating assets in Section 3c of your F-1? **If the answer is YES** (if you control the buy and sell decisions) **you must identify the individual securities or mutual funds held.**
- Did you disclose all of your retirement accounts (i.e. IRA, 401 k, deferred compensation, PERS 1, 2, 3 or TRS or LEOFF, etc.)?
- Did you complete all of the questions in Section 5 of the F-1?

Questions? If you have questions, you may contact PDC staff at (360) 753-1111; 1-877-601-2828 (toll-free in Washington State). The PDC Fax number is: (360) 753-1112. E-mail: pdc@pdc.wa.gov. The PDC address is on the last page of this form (Certification).

Application Questionnaire

Background Information

Filer Name: Jenny A. Durkan

Filer Office Held or Sought: Mayor of Seattle

Date of Request: April 4, 2018

Period Covered by Request: May 23-November 28, 2017

Questions

Please answer questions # 1 - # 9 below, unless:

- RESIDENTIAL ADDRESS. If you are seeking only nondisclosure of a residential address, answer # 1, # 4, # 6 and # 8.
- SPOUSAL SEPARATION. If you are seeking only nondisclosure of information related to your spouse based upon a recent or pending divorce or separation, or because it relates to a bona fide separate property agreement or other bona fide separate status, answer # 1, # 4, # 7, # 8 and # 9. A request for nondisclosure may be considered when such financial interest does not constitute a present or prospective source of income for you.

1. **EMAIL AUTHORIZATION.** Check the box below to give the PDC permission to provide future correspondence about your request – including hearing orders – to you by email.

xx I authorize the PDC to provide future correspondence to me email rather than sending it through the U. S. mail.

Email address: jenny.durkan@seattle.gov
with copy to dburman@perkinscoie.com

2. **MODIFICATION REQUEST SUMMARY.** Describe the general nature of the information you do not wish to disclose. (Examples: financial interests where reporting the name would likely adversely affect the competitive position of an entity, customer lists of a business entity or sources of compensation/income for the entity, confidential relationships, information subject to bona fide separate property agreements, personal residential address, other).

This is a renewal request. As a candidate last year, I requested and received a modification of the requirements for reporting sources of compensation for a law firm as provided in WAC 390-28-100(1)(e)(i). At that time I was a partner in Quinn Emanuel Urquhart & Sullivan, LLP and received permission to disclose only reportable clients from whom compensation has been paid in excess of the reporting threshold in the following categories: (1) business and government clients for whom I or others in the Seattle office (the firm's only office in or within 500 miles of Washington State) have performed work; and (2) business and government clients with billing addresses in the State of Washington regardless of any connection to the Seattle office. I was not and

am not aware of any other clients of the law firm whose interests would be significantly affected by my actions as Mayor.

That request was approved. I finished one matter, for a disclosed client, since that request and the accompanying disclosure. I then took unpaid leave for the rest of the campaign and then separated from the firm on November 28, 2017. Thus, the same basis for last year's modification applies fully, and there are no additional clients to disclose.

I am attaching last year's modification request and F-1. I am answering the questions below similarly to last year but reflecting the fact that I have left the firm and no longer have access to its information.

3. **UNREASONABLE HARDSHIP.** Describe in detail the manifestly unreasonable hardship in disclosing the information. Please describe in detail the reasons why you believe disclosing the information would be a hardship. The reasons stated should address the issues such as those listed below. Please address those topics below that are relevant to your specific request. For example, if you are seeking nondisclosure related to an entity, for each entity, please:

- Provide the name and description of the entity, business, union, association, not-for-profit, charitable organization, or other entity for which you are seeking a modification request from reporting the entity's disclosable customers/sources of compensation/income.

Quinn Emanuel Urquhart & Sullivan, LLP

- Describe the size of the entity such as annual sales, number of customers or accounts, the number of employees, and other pertinent information.

Quinn Emanuel is an international law firm with twenty one offices on four continents and in ten countries. When I left, the firm employed over 650 attorneys and was one of the 70 largest law firms in the United States. The Seattle office is only a few years old and employed only a few of the over 650 lawyers.

- Describe how many business customers or other sources paying the entity more than \$12,000 would be subject to disclosure.

Hundreds, if not thousands.

- Describe if you have access to information about the entity's customer base or sources of compensation/income.

Access is very carefully controlled even among partners, and I can no longer learn internal information as to client names and compensation.

- Describe if you are involved with the day-to-day operations of the entity.

I am no longer involved at all. Before I left, I was not involved beyond the Seattle office, and only in a limited way there, as described below.

- Describe if any of the entity's customers or sources of compensation/income are already listed in other public sources or publications including advertisements, or public records.

Yes, some of the clients of the firm are listed on the firm's website or in other promotional materials. Clients are primarily disclosed in the individual attorney bios on the website, and it would be extremely difficult to go through all 650 of those and identify client names. The firm is primarily engaged in litigation, so many clients of the firm are also listed on public court records around the country and in other countries once a lawsuit is commenced. It would also be extraordinarily difficult to compile that information, and it would risk invading the confidentiality of client representations that have not resulted in litigation. The attached Exhibit provides business and government clients that I or other members of the Seattle office of the law firm (the firm's only office in or within 500 miles of Washington State) have worked for, as well as business and government clients with billing addresses in the State of Washington regardless of any connection to the Seattle office. There are no other clients of the law firm that I was aware of when I left the firm, or now, whose interests would be significantly affected by my actions.

- Describe if any of the entity's customers or sources of compensation/income are already listed on a website.

See above.

- If the entity has a website address, list it here: <http://www.quinnemanuel.com/>
- If the entity's customers or sources of compensation/income are described elsewhere on the Internet, describe why you are seeking a modification (nondisclosure) for those customers or sources of compensation/income:

I do not have a full list of public websites where clients of the firm may be disclosed. The full list of publicly disclosed clients would be difficult to compile. My legal work while at the firm also bore no relation to the vast majority of these clients. Therefore, it would be an unreasonable hardship, and would not further the purpose of the Public Disclosure Act, for me to attempt to compile a full list of these clients.

- Describe if the entity has the ability to sort its customer list or sources of compensation/income to identify those paying the entity more than \$12,000 during the reporting period.

Yes, but I am no longer entitled to such information.

- Describe if you disclosed all of the governmental customers or governmental sources of compensation/income that paid the entity more than \$12,000 in the reporting period.

The attached Exhibit discloses all government clients for whom I or others in the Seattle office performed legal work as well as governmental clients with billing addresses in the State of Washington regardless of any connection to the Seattle office. We have identified no Washington State government clients for whom others in the firm have done any work.

- Indicate whether you have an ownership interest of 10% or more in the entity.

No.

- Indicate whether your spouse's interest in an entity requires you to complete an F-1 Supplement for that entity.

Not applicable.

- Describe other relevant information you believe the Commission should consider as to why it would be a manifestly unreasonable hardship if the information was required to be disclosed.

As noted above, the Seattle office performs a very small amount of the total work performed by the firm as a whole, with only a few out of over 650 firm lawyers working from that office. Even when I was still at the firm, attempting to compile a full list of all clients who paid the firm an amount above the reporting threshold and who are publicly disclosed somewhere would take an enormous amount of time and would result in disclosure of a large number of sensitive and often otherwise confidential relationships. The sensitive information would bear no relation to myself or my duties.

4. **NOT FRUSTRATE THE PURPOSES OF THE ACT.** Describe how allowing you to not disclose the information described in your modification request does not frustrate the purposes of the Public Disclosure Act.

As noted above, Quinn Emanuel is an international law firm and the Seattle office, like any small group of firm lawyers, performs only a small amount of the total work performed by the entity as a whole. I did not perform any legal work for, or have any involvement with, the vast majority of the firm's clients. In the general course of my standard practice I did not even have reason to know the identities of these clients. In seeking this modification, I am attempting to ensure full disclosure of the reportable clients with whom I have had any involvement with whatsoever while avoiding the unreasonable hardship that the standard reporting requirements would impose.

5. **DUTIES.** Describe your duties as an elected or appointed official. Please describe the jurisdiction or agency for which you hold public office, and the duties performed by you as a public official (examples: adopting rules or ordinances, hiring staff, approving contracts, setting policy, etc.). Please provide as much description as possible.

Mayor of Seattle.

6. **CUSTOMERS OR SOURCES OF COMPENSATION/INCOME.** If you are seeking a modification related to a particular entity's reportable customers or sources of compensation/income for an entity, describe:

- In detail the position you hold in the entity (examples: owner, board member, officer, partner, etc.) and the duties performed by you for that entity, if any (examples: setting policy, hiring, approving contracts, approving budgets, etc.). Please provide as much description as possible.

I was a partner in the Seattle office of the law firm. Day to day management of the office is the responsibility of an administrator. I had no management role or ability to approve contracts for other offices.

- If you (or if you are seeking office, will you) make any decisions as a public official that may benefit the customers of the entity for which you are seeking a modification, or sources of compensation/income for the entity for which you are seeking a modification?

Clients whose interests could be significantly affected by my actions as Mayor that I am aware of (if any) are disclosed in the attached Exhibit A.

7. **RESIDENTIAL ADDRESS.** Are you requesting to be exempted from disclosing the address of your personal residence in the Real Estate Section of the F-1? In this situation, you or your spouse may be a law enforcement officer, prosecutor, judge, or other official, and the disclosure of the address of your primary residence on the F-1 form could cause you or your family harm, based upon tangible evidence or a specific threat. If so, please explain in detail the **manifestly unreasonable hardship** if disclosure were required, and **why the purposes of the act would not be frustrated** if disclosure of the address was not required. If nondisclosure is based upon an anti-harassment or similar court order, please state.
-

8. **SPOUSAL SEPARATION.** Are you requesting to be exempted from disclosing information related to your spouse based on a pending or recent divorce or separation, or bona fide separate property agreement or other bona fide separate status? In this situation, the filer has little or no knowledge of spouse's or former spouse's income, assets, liabilities or relationship to outside entities for which reporting may be required. (For example, do you file separate income tax returns?) The filer does not have access to spouse's or former spouse's financial information. The financial interest of the spouse or former spouse does not constitute a present or prospective source of income for the filer. If this is your situation, please describe.
-

9. **CONFLICT RECUSAL.** If any matter coming before you at the public entity you serve involves a conflict of interest between your personal interests and your public duties, do you promise to recuse yourself from that matter, whether or not you have disclosed that personal interest on an F-1 form?

Yes as appropriate and required by all applicable laws.

No

If you answered no, please explain why not.

10. **OTHER INFORMATION.** Is there any other information you want the Commission to consider regarding your modification request? (If you are attaching any information or documents, please describe attachments.)

I am attaching an Exhibit of the clients of Quinn Emanuel that fall within the categories provided in #2 above during the time I was employed there.

➤ **IF YOU WILL NOT BE ATTENDING THE HEARING IN PERSON OR BY PHONE TO ATTEST THE ABOVE INFORMATION AND RESPOND TO COMMISSION QUESTIONS, YOU MUST ALSO COMPLETE AND SIGN THE ATTACHED CERTIFICATION PRIOR TO SUBMISSION.**

Jenny A Durkan
Modification Application Questionnaire
PDC Exhibit A

Client Name	Purpose
Confederacion Sudamericana de Futbol (CONMEBOL)	Legal Services
Daimler AG	Legal Services
Dust Pro, Inc.	Legal Services
Esplanade Productions, Inc.	Legal Services
E*Trade Financial Corporation	Legal Services
FIFA	Legal Services
Google Inc.	Legal Services
Home Depot USA	Legal Services
IBM	Legal Services
Muckleshoot Indian Tribe	Legal Services
Port of Seattle	Legal Services
PPG Industries, Inc.	Legal Services
Rhapsody International	Legal Services
Rockefeller Family Fund	Legal Services
Spotify USA Inc.	Legal Services
State Farm Insurance Company	Legal Services
The Coca Cola Company	Legal Services
TV Eyes	Legal Services



PUBLIC DISCLOSURE COMMISSION
 711 CAPITOL WAY RM 206
 PO BOX 40908
 OLYMPIA WA 98504-0908
 (360) 753-1111
 TOLL FREE 1-877-601-2828

PDC FORM
F-1
 (1/15)

PERSONAL FINANCIAL AFFAIRS STATEMENT

PDC OFFICE USE

DATE FILED PDC
APR 11 2018

Refer to instruction manual for detailed assistance and examples.
Deadlines: Incumbent elected and appointed officials -- by April 15.
 Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position.

DOLLAR CODE	AMOUNT
A	\$1 to \$4,499
B	\$4,500 to \$23,999
C	\$24,000 to \$47,999
D	\$48,000 to 119,999
E	\$120,000 or more

SEND REPORT TO PUBLIC DISCLOSURE COMMISSION

Last Name First Middle Initial
 DURKAN JENNY A

Names of immediate family members, including registered domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for details.

Mailing Address (Use PO Box or Work Address)
 OFFICE OF THE MAYOR, P.O. BOX 94749
 City County Zip + 4
 SEATTLE KING 98124-4749

Filing Status (Check only one box.)
 An elected or state appointed official filing annual report
 Final report as an elected official. Term expired: _____
 Candidate running in an election: month _____ year _____
 Newly appointed to an elective office
 Newly appointed to a state appointive office
 Professional staff of the Governor's Office and the Legislature

Office Held or Sought
 Office title: MAYOR
 County, city, district or agency of the office, name and number: CITY OF SEATTLE
 Position number: _____
 Term begins: 11-28-2017 ends: 12-31-2021

1 INCOME List each employer, or other source of income (pension, social security, legal judgment, etc.) from which you or a family member, including registered domestic partner, received \$2,400 or more during the period. Include stock options received during the reporting period that had a value of \$2,400 or more. (Report interest and dividends in Item 3 on reverse)

Show Self (S) Spouse (SP/DP) Dependent (D)	Name and Address of Employer or Source of Compensation	Occupation or How Compensation Was Earned	Amount: (Use Code)
S	Quinn Emanuel, Urquhart & Sullivan, 600 University Street, Suite 2800 SEATTLE WA 98101	Attorney	E
S	City of Seattle P.O. Box 94749 SEATTLE WA 98124	Mayor	B

Check Here if continued on attached sheet

2 REAL ESTATE List street address, assessor's parcel number, or legal description AND county for each parcel of Washington real estate with value of over \$12,000 in which you or a family member, including registered domestic partner, held a personal financial interest during the reporting period. (Show partnership, company, etc. real estate on F-1 supplement.)

Property Sold or Interest Divested	Assessed Value (Use Code)	Name and Address of Purchaser	Nature and Amount (Use Code) of Payment or Consideration Received		
Address confidentiality modification previously granted	E	Jennifer Cast & Elizabeth Franklin 2647 Cascadia Ave S. Seattle, WA 98144	E		
Property Purchased or Interest Acquired		Creditor's Name/Address	Payment Terms	Security Given	Mortgage Amount - (Use Code) Original Current
All Other Property Entirely or Partially Owned S/2 E/2 NE SW FR 200-2281 Whidbey Island	E				0 0

Check here if continued on attached sheet

CONTINUE ON NEXT PAGE

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

List bank and savings accounts, insurance policies, stock, bonds and other intangible property (including but not limited to stock options) held during the reporting period.

A. Name and address of each bank or financial institution in which you or a family member, including registered domestic partner, had an account over \$24,000 any time during the report period.	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
JPM Chase 1201 Third Avenue Seattle WA98101	Checking & Savings	E	A
B. Name and address of each insurance company where you or a family member, including registered domestic partner had a policy with a cash or loan value over \$24,000 during the period.			
C. Name and address of each company, association, government agency, etc. in which you or a family member, including registered domestic partner, owned or had a financial interest worth over \$2,400. Include stocks, bonds, ownership, retirement plan, IRA, notes, stock options, and other intangible property. If you, your spouse, registered domestic partner and/or dependents had decision making authority regarding individual assets/investments list each asset or investment, the value and any income amount. EXAMPLE: If you self directed an investment account, identify each stock or other asset in that account. Quinn Emanuel Defined Benefit Plan 600 University Street, Suite 2800 Seattle WA 98101	Defined Benefit Plan	E	0

Check here if continued on attached sheet.

4 CREDITORS List each creditor you or a family member, including registered domestic partner, owed \$2,400 or more any time during the period. Don't include retail charge accounts, credit cards, or mortgages or real estate reported in Item 2. **AMOUNT (USE CODE)**

Creditor's Name and Address	Terms of Payment	Security Given	Original	Present

Check here if continued on attached sheet.

5 All filers answer questions A thru D below. If the answer is YES to any of these questions, the F-1 Supplement must also be completed as part of this report. If all answers are NO and you are a candidate for state or local office, an appointee to a vacant elective office, or a state executive officer filing your initial report, no F-1 Supplement is required.

Incumbent elected officials and state executive officers filing an annual financial affairs report also must answer question E. An F-1 Supplement is required of these officeholders unless all answers to questions A thru E are NO.

- A. At any time during the reporting period were you, your spouse, registered domestic partner or dependents (1) an officer, director, general partner or trustee of any corporation, company, union, association, joint venture or other entity or (2) a partner or member of any limited partnership, limited liability partnership, limited liability company or similar entity including but not limited to a professional limited liability company? If yes, complete Supplement, Part A.
- B. Did you, your spouse, registered domestic partner or dependents have an ownership of 10% or more in any company, corporation, partnership, joint venture or other business at any time during the reporting period? If yes, complete Supplement, Part A.
- C. Did you, your spouse, registered domestic partner or dependents own a business at any time during the reporting period? If yes, complete Supplement, Part A.
- D. Did you, your spouse, registered domestic partner or dependents prepare, promote or oppose state legislation, rules, rates or standards for current or deferred compensation (other than pay for a currently-held public office) at any time during the reporting period? If yes, complete Supplement, Part B.
- E. **Only for Persons Filing Annual Report.** Regarding the receipt of items not provided or paid for by your governmental agency during the previous calendar year: 1) Did you, your spouse, registered domestic partner or dependents (or any combination thereof) accept a gift of food or beverages costing over \$50 per occasion? No or 2) Did any source other than your governmental agency provide or pay in whole or in part for you, your spouse, registered domestic partner and/or dependents to travel or to attend a seminar or other training? No. If yes to either or both questions, complete Supplement, Part C.

ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.

I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns.

I hold a local elected office. I have read and am familiar with RCW 42.17A.555 regarding the use of public facilities in campaigns.

*CANDIDATES: Do not use public agency addresses or telephone numbers for contact information.

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

Jenny A Durkan 4/10/18
 Signature _____ Date _____

Contact Telephone: 206-684-4000 *

Email: jenny.durkan@seattle.gov (work)*

Email: _____ (Home) Optional

REPORT NOT ACCEPTABLE WITHOUT FILER'S SIGNATURE

FINANCIAL INSTITUTIONS CONTINUED

F-1

Name **DURKAN, JENNY A** Page **3**

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

A. Name and address of each bank or financial institution	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Wells Fargo 999 Third Avenue Seattle WA 98104	Checking & Savings	B	A

Check here if continued on attached sheet.

COMPANY, ASSOC., GOVERNMENT AGENCY CONTINUED

F-1

Name DURKAN, JENNY A

Page 4

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

C. Name and address of each company, association, government agency	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Merrill Lynch 401(k) & Profit Sharing 1215 4th Avenue Seattle WA 98161	Retirement Plan	E	0
Federal Thrift Savings Plan P.O. Box 385021 Birmingham AL 35238	Retirement Plan: G Fund -Govt Securities Inv Fund	E	0
The Riveter 1517 12th Avenue Seattle WA 98122	Private Investment	C	0
Wells Fargo Investment Advisors 777 108th Ave NE Bellevue WA 98004	IRA	E	0
Bessemer Trust 630 Fifth Ave New York NY 10111	Investment Management - Old Westbury Fund, Inc.	E	D
Bessemer Trust 630 Fifth Ave New York NY 10111	Cash - Money Market Sweep	E	B
Bessemer Trust 630 Fifth Ave New York NY 10111	Roth IRA - Old Westbury Fund, Inc.	E	0
Bessemer Trust 630 Fifth Ave New York NY 10111	Jenny Durkan, BENE of L Durkan IRA	D	A
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Money Market	D	A
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Costco Wholesale Co. (COST)	B	A
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Nanometrics Inc. (NANO)	B	0
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Energy Select Sector SPDR ETF (XLE)	B	A

Check here if continued on attached sheet.

COMPANY, ASSOC., GOVERNMENT AGENCY CONTINUED

F-1

Name DURKAN, JENNY A

Page 5

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

C. Name and address of each company, association, government agency	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	ETFs Gold Trust ETF (SGOL)	C	0

Check here if continued on attached sheet.



PUBLIC DISCLOSURE COMMISSION
 711 CAPITOL WAY RM 206
 PO BOX 40908
 OLYMPIA WA 98504-0908
 (360) 753-1111
 TOLL FREE 1-877-601-2828
 EMAIL: pdc@pdc.wa.gov

PDC FORM
F-1
 SUPPLEMENT
 (1/15)

SUPPLEMENT PAGE
 PERSONAL FINANCIAL AFFAIRS STATEMENT

PROVIDE INFORMATION FOR YOURSELF, SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD

Last Name DURKAN	First JENNY	Middle Initial A	DATE 04-04-2018
---------------------	----------------	---------------------	--------------------

- A OFFICE HELD, BUSINESS INTERESTS:** Provide the following information if, during the reporting period, you, your spouse, registered domestic partner or dependents
- (1) were an officer, director, general partner, trustee, or 10 percent or more owner of a corporation, non-profit organization, union, partnership, joint venture or other entity; and/or
 - (2) were a partner or member of a limited partnership, limited liability partnership, limited liability company or similar entity, including but not limited to a professional limited liability company.
- Legal Name: Report name used on legal documents establishing the entity.
 - Trade or Operating Name: Report name used for business purposes if different from the legal name.
 - Position or Percent of Ownership: The office, title and/or percent of ownership held.
 - Brief Description of the Business/Organization: Report the purpose, product(s), and/or the service(s) rendered.
 - Payments from Governmental Unit: If the governmental unit in which you hold or seek office made payments to the business entity concerning which you're reporting, show the purpose of each payment and the actual amount received.
 - Payments from Business Customers and Other Government Agencies: List each corporation, partnership, joint venture, sole proprietorship, union, association, business or other commercial entity and each government agency (other than the one you seek/hold office) which paid compensation of \$12,000 or more during the period to the entity. Briefly say what property, goods, services or other consideration was given or performed for the compensation.
 - Washington Real Estate: Identify real estate owned by the business entity if the qualifications referenced below are met.

ENTITY NO. 1

Reporting For: Self Spouse
 Registered Domestic Partner Dependent

LEGAL NAME:

Quinn Emanuel, Urquhart & Sullivan, LLP

POSITION OR PERCENT OF OWNERSHIP
 Attorney

TRADE OR OPERATING NAME:

Quinn Emanuel, Urquhart & Sullivan, LLP

ADDRESS:

600 University Street, Suite 2800
 Seattle WA 98101

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

Law Firm

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:

Purpose of payments

Amount (actual dollars)
 \$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:

Agency name:

Purpose of payment (amount not required)

Refer to Renewed Modification Request

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE:

Customer name:

Purpose of payment (amount not required)

Refer to Renewed Modification Request

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

CONTINUE PARTS B AND C ON NEXT PAGES

View/Print/Save F1 as PDF

View/Print/Save F15 as PDF

Save

Exit

Start Here 1 - Income 2 - Real Estate 3 - Assets/Invest - Int/Div 4 - Creditors 5 - Questions Certification and Declaration

pdc Building Confidence in the Political Process
Public Disclosure Commission

HOME

PUBLIC RESOURCES

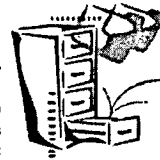
FILER RESOURCES

CANDIDATES COMMITTEES LOBBYING ADVERTISING SPONSORS ELECTED & APPOINTED OFFICIALS OTHER FILERS

DATE FILED PDC

MAY 23 2017

JENNY DURKAN



Your pending F1 has been received. PDC staff will review your registration and activate your account, usually within 2 business days. When your account is activated, you will receive an additional email message with your permanent Filer ID. If you would like to contact us regarding this registration, please open a request using the help link on the PDC web site and provide us with your temporary Filer ID which is E76863-SOYC

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711 CAPITOL WAY #206 / PO BOX 40306 / OLYMPIA WA 98504-0908

PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828	PDC FORM <h1 style="margin: 0;">F-1</h1> (1/15)	<h2 style="margin: 0;">PERSONAL FINANCIAL AFFAIRS STATEMENT</h2>	PDC OFFICE USE DATE FILED PDC <h3 style="margin: 0;">MAY 23 2017</h3>
--	---	--	---

Refer to instruction manual for detailed assistance and examples. Deadlines: Incumbent elected and appointed officials -- by April 15. Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position. SEND REPORT TO PUBLIC DISCLOSURE COMMISSION	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">DOLLAR CODE</th> <th style="text-align: left;">AMOUNT</th> </tr> <tr> <td>A</td> <td>\$1 to \$4,499</td> </tr> <tr> <td>B</td> <td>\$4,500 to \$23,999</td> </tr> <tr> <td>C</td> <td>\$24,000 to \$47,999</td> </tr> <tr> <td>D</td> <td>\$48,000 to 119,999</td> </tr> <tr> <td>E</td> <td>\$120,000 or more</td> </tr> </table>	DOLLAR CODE	AMOUNT	A	\$1 to \$4,499	B	\$4,500 to \$23,999	C	\$24,000 to \$47,999	D	\$48,000 to 119,999	E	\$120,000 or more
DOLLAR CODE	AMOUNT												
A	\$1 to \$4,499												
B	\$4,500 to \$23,999												
C	\$24,000 to \$47,999												
D	\$48,000 to 119,999												
E	\$120,000 or more												

Last Name	First	Middle Initial	Names of immediate family members, including registered domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for details.
DURKAN	JENNY	A	
Mailing Address (Use PO Box or Work Address)			

603 STEWART STREET SUITE 819		
City	County	Zip + 4
SEATTLE	KING	98101-1229

Filing Status (Check only one box.) <input type="checkbox"/> An elected or state appointed official filing annual report <input type="checkbox"/> Final report as an elected official. Term expired: _____ <input checked="" type="checkbox"/> Candidate running in an election: month <u>AUG</u> year <u>2017</u> <input type="checkbox"/> Newly appointed to an elective office <input type="checkbox"/> Newly appointed to a state appointive office <input type="checkbox"/> Professional staff of the Governor's Office and the Legislature	Office Held or Sought Office title: <u>MAYOR</u> <hr/> County, city, district or agency of the office, name and number: <u>CITY OF SEATTLE</u> Position number: _____ Term begins: <u>01-01-2018</u> ends: <u>12-31-2021</u>
---	--

1 INCOME List each employer, or other source of income (pension, social security, legal judgment, etc.) from which you or a family member, including registered domestic partner, received \$2,400 or more during the reporting period that had a value of \$2,400 or more. (Report interest and dividends in Item 3 on reverse)

Show Self (S) Spouse (SP/DP) Dependent (D)	Name and Address of Employer or Source of Compensation	Occupation or How Compensation Was Earned	Amount: (Use Code)
	Quinn Emanuel, Urquhart & Sullivan, 600 University Street, Suite 2800 SEATTLE WA 98101	Attorney (Partner)	
Check Here <input type="checkbox"/> if continued on attached sheet			

2 REAL ESTATE List street address, assessor's parcel number, or legal description AND county for each parcel of Washington real estate with value of over \$12,000 in which you or a family member, including registered domestic partner, held a personal financial interest during the reporting period. (Show partnership, company, etc. real estate on F-1 supplement.)

Property Sold or Interest Divested	Assessed Value (Use Code)	Name and Address of Purchaser	Nature and Amount (Use Code) of Payment or Consideration Received					
Property Purchased or Interest Acquired		Creditor's Name/Address	Payment Terms	Security Given				
Request for Modification	E	Wells Fargo 999 3rd Avenue Seattle WA 98104	7 year ARM at 3.125%	Mortgage				
All Other Property Entirely or Partially Owned				Mortgage Amount - (Use Code)				
S/2 E/2 NE SW FR 200-2281 Whidbey Island County Check here <input type="checkbox"/> if continued on attached sheet	E			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Original</th> <th style="width:50%;">Current</th> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> </tr> </table>	Original	Current	0	0
Original	Current							
0	0							

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

List bank and savings accounts, insurance policies, stock, bonds and other intangible property (including but not limited to stock options) held during the reporting period.

A. Name and address of each bank or financial institution in which you or a family member, including registered domestic partner, had an account over \$24,000 any time during the report period.	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
1201 Third Avenue Seattle WA 98101	Checking & Savings	E	A
EXAMPLE: If you self directed an investment account identify each stock or other asset in that account. Seattle WA 98101	Defined Benefit Plan	D	0

Check here if continued on attached sheet.

4 CREDITORS List each creditor you or a family member, including registered domestic partner, owed \$2,400 or more any time during the period. Don't include retail charge accounts, credit cards, or mortgages or real estate reported in Item 2. **AMOUNT (USE CODE)**

Creditor's Name and Address	Terms of Payment	Security Given	Original	Present

Check here if continued on attached sheet.

5 All filers answer questions A thru D below. If the answer is YES to any of these questions, the F-1 Supplement must also be completed as part of this report. If all answers are NO and you are a candidate for state or local office, an appointee to a vacant elective office, or a state executive officer filing your initial report, no F-1 Supplement is required.

Incumbent elected officials and state executive officers filing an annual financial affairs report also must answer question E. An F-1 Supplement is required of these officeholders unless all answers to questions A thru E are NO.

- A. At any time during the reporting period were you, your spouse, registered domestic partner or dependents (1) an officer, director, general partner or trustee of any corporation, company, union, association, joint venture or other entity or (2) a partner or member of any limited partnership, limited liability partnership, limited liability company or similar entity including but not limited to a professional limited liability company? If yes, complete Supplement, Part A.
- B. Did you, your spouse, registered domestic partner or dependents have an ownership of 10% or more in any company, corporation, partnership, joint venture or other business at any time during the reporting period? If yes, complete Supplement, Part A.
- C. Did you, your spouse, registered domestic partner or dependents own a business at any time during the reporting period? If yes, complete Supplement, Part A.
- D. Did you, your spouse, registered domestic partner or dependents prepare, promote or oppose state legislation, rules, rates or standards for current or deferred compensation (other than pay for a currently-held public office) at any time during the reporting period? If yes, complete Supplement, Part B.
- E. **Only for Persons Filing Annual Report.** Regarding the receipt of items not provided or paid for by your governmental agency during the previous calendar year: 1) Did you, your spouse, registered domestic partner or dependents (or any combination thereof) accept a gift of food or beverages costing over \$50 per occasion? or 2) Did any source other than your governmental agency provide or pay in whole or in part for you, your spouse, registered domestic partner and/or dependents to travel or to attend a seminar or other training? If yes to either or both questions, complete Supplement, Part C.

ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.

I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns.

I hold a local elected office. I have read and am familiar with RCW 42.17A.555 regarding the use of public facilities in campaigns.

***CANDIDATES:** Do not use public agency addresses or telephone numbers for contact information.

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

Signature _____ Date _____

Contact Telephone: _____ *

Email: _____ (work)*

Email: _____ (Home) Optional

FINANCIAL INSTITUTIONS CONTINUED

F-1

Name DURKAN, JENNY A

Page 3

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

A. Name and address of each bank or financial institution	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Wells Fargo 999 Third Avenue Seattle WA 98104	Checking & Savings	B	A

Check here if continued on attached sheet.

COMPANY, ASSOC., GOVERNMENT AGENCY CONTINUED

F-1

Name DURKAN, JENNY A

Page 4

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

C. Name and address of each company, association, government agency	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Merrill Lynch 401(k) & Profit Sharing 1215 4th Avenue Seattle WA 98161	Retirement Plan	E	0
Federal Thrift Savings Plan P.O. Box 385021 Birmingham AL 35238	Retirement Plan: G Fund -Govt Securities Inv Fund	E	0
The Riveter 1517 12th Avenue Seattle WA 98122	Private Investment	C	0
Wells Fargo Investment Advisors 777 108th Ave NE Bellevue WA 98004	IRA	E	0
Bessemer Trust 630 Fifth Ave New York NY 10111	Investment Management - Old Westbury Fund, Inc.	E	B
Bessemer Trust 630 Fifth Ave New York NY 10111	Cash - Money Market Sweep	E	A
Bessemer Trust 630 Fifth Ave New York NY 10111	Roth IRA - Old Westbury Fund, Inc.	E	0
Bessemer Trust 630 Fifth Ave New York NY 10111	Jenny Durkan, BENE of L Durkan IRA	D	A
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Money Market	D	A
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Costco Wholesale Co. (COST)	B	A
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Nanometrics Inc. (NANO)	B	0
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Energy Select Sector SPDR ETF (XLE)	B	A

COMPANY, ASSOC., GOVERNMENT AGENCY CONTINUED

F-1

Name DURKAN, JENNY A

Page 5

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

C. Name and address of each company, association, government agency	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	ETFs Gold Trust ETF (SGOL)	C	0

Check box if continued on attached sheet

COPY

Washington State Public Disclosure Commission
Personal Financial Affairs Statement
Reporting Modification Application Questionnaire, Instructions And Certification
June 2015



DATE FILED PDC
MAY 23 2017

Application Questionnaire Instructions

The purpose of the Public Disclosure Act in chapter RCW 42.17A includes at RCW 42.17A.001(3):

"That the people shall be assured that the private financial dealings of their public officials, and of candidates for those offices, present no conflict of interest between the public trust and private interest."

The form for providing disclosures of financial affairs is the F-1 Personal Financial Affairs Statement. The Act also provides for a process to seek a modification or suspension of reporting some information. RCW 42.17A.110(10) states in part:

*"After hearing, by order approved and ratified by a majority of the membership of the commission, [the commission is empowered to] suspend or modify any of the reporting requirements of this chapter in a particular case if it finds that literal application of this chapter works a **manifestly unreasonable hardship** and if it also finds that the suspension or modification will not **frustrate the purposes of the chapter...***

... Any suspension or modification shall be only to the extent necessary to substantially relieve the hardship. The commission shall act to suspend or modify any reporting requirements only if it determines that facts exist that are clear and convincing proof of the findings required under this section." (Emphasis added).

Possible qualifications for modifications or suspensions (referred to collectively as "modifications") are found at RCW 42.17A.110(10) and WAC 390-28-100. Copies of these provisions and reporting requirements are on the PDC's website at www.pdc.wa.gov under "Laws and Rules." The *Personal Financial Affairs Statement Instruction Manual* is also available on the website, under "Filer Resources – Manuals and Brochures." The Commission has also adopted Interpretations addressing modifications for certain professions and situations, and those are also available under "Laws and Rules" then "Interpretations." Modifications, if granted by the Commission, cover only one reporting period. Another application must be made in the following years if you still need a modification.

PDC staff has implemented this application procedure for filers requesting an F-1 Reporting Modification from the Commission. This is designed to provide more uniform information to the Commission from filers seeking a modification, and to enable a quicker response to possible questions about a request from the Commission at the hearing. **Please fill out this Application Questionnaire prior to having a modification request taken to the full Commission for consideration.** The blanks in this document will expand to accommodate your answers. **It is suggested that you review this entire Application Questionnaire first, before filling out your answers.**

✓ **If you are requesting a modification, whether new or a renewal of an earlier request, please:**

- (1) **Complete or review your filed Personal Financial Affairs Statement (PDC Form F- 1) including Supplemental attachments (*except* for the information for which you are seeking a modification – leave the relevant sections or lines blank on the F-1 form at this time);**
- (2) **Answer all questions (# 1 – # 8) on this Application Questionnaire, unless otherwise directed below,**
- (3) **Confirm whether you authorize the PDC to use email may correspond with you about your request by email:**
- (4) **Sign the Certification if you do not intend to be present at the Commission hearing on your modification request, and**
- (5) **Return this Application Questionnaire to the PDC via e-mail, mail, fax or other delivery (and also send the original of the Certification to the PDC).**

- Please note, however, that while this Application Questionnaire for filers seeking a modification can be returned to the PDC in several ways, **F-1 forms cannot be filed by fax or e-mail.** See filing instructions in the *Personal Financial Affairs Statement Instruction Manual*.

✓ **Other items to consider:**

- **Filers for which a PDC Interpretation may apply.** As noted, the Commission has adopted Interpretations for specific filers that are requesting modifications. Those filers include attorneys, automobile dealers, judges and judicial candidates, and spouses of elected and appointed officials, and also include candidates for public office. If you qualify as a filer under an Interpretation, please review the applicable Interpretation and provide the information pursuant to the Interpretation as part of your F-1 or F-1 Supplement forms. Copies of the Interpretations are available on the PDC website at www.pdc.wa.gov under "Laws & Rules" then "Interpretations."
 - **Competitive disadvantage.** If you are claiming a competitive disadvantage (in disclosing information), you must describe in detail the competitive environment in which the entity operates and explain how disclosure would likely affect the competitive position of the entity.
- ✓ **Please carefully review your F-1 and/or F-1 Supplement to ensure each form is fully completed.** Here are some commonly overlooked areas:
- Do you make the buy and sell decisions with regard to the IRA's, stocks and other securities listed as retirement or income generating assets in Section 3c of your F-1? **If the answer is YES (if you control the buy and sell decisions) you must identify the individual securities or mutual funds held.**
 - Did you disclose all of your retirement accounts (i.e. IRA, 401 k, deferred compensation, PERS 1, 2, 3 or TRS or LEOFF, etc.)?
 - Did you complete all of the questions in Section 5 of the F-1?

Questions? If you have questions, you may contact PDC staff at (360) 753-1111; 1-877-601-2828 (toll-free in Washington State). The PDC Fax number is: (360) 753-1112. E-mail: pdcc@pdc.wa.gov. The PDC address is on the last page of this form (Certification).

Application Questionnaire

Background Information

Filer Name: Jenny A. Durkan

Filer Office Held or Sought: Candidate for Mayor of Seattle

Date of Request: May 23, 2017

Period Covered by Request: Prior twelve months

Questions

Please answer questions # 1 - # 8 below, unless:

- **RESIDENTIAL ADDRESS.** If you are seeking only nondisclosure of a residential address, answer # 1, # 4, # 6 and # 8.
- **SPOUSAL SEPARATION.** If you are seeking only nondisclosure of information related to your spouse based upon a recent or pending divorce or separation, or because it relates to a bona fide separate property agreement or other bona fide separate status, answer # 1, # 4, # 7 and # 8. A request for nondisclosure may be considered when such financial interest does not constitute a present or prospective source of income for you.



1. **EMAIL AUTHORIZATION.** Check the box below to give the PDC permission to provide future correspondence about your request – including hearing orders – to you by email.

I authorize the PDC to provide future correspondence to me email rather than sending it through the U. S. mail.

Email address: jdurkan@mac.com

With copy to dburman@perkinscoie.com

2. **MODIFICATION REQUEST SUMMARY.** Describe the general nature of the information you do not wish to disclose. (Examples: financial interests where reporting the name would likely adversely affect the competitive position of an entity, customer lists of a business entity or sources of compensation/income for the entity, confidential relationships, information subject to bona fide separate property agreements, personal residential address, other).

Modification Request #1: Law Firm Compensation

I am requesting a modification of the requirements for reporting sources of compensation for a law firm along the lines of the modification provided for in Wash. Admin. Code § 390-28-100(1)(e)(i). I am a partner at Quinn Emanuel Urquhart & Sullivan, LLP and am requesting permission to disclose only reportable clients from whom compensation has been paid in excess of the reporting threshold in the following categories: (1) business and government clients for whom I or others in the Seattle office (the firm's only office in or within 500 miles of Washington State) have performed work; and (2) business and government clients with billing addresses in the State of Washington regardless of any connection to the Seattle office. I am not aware of any other clients of the law firm whose interests would be significantly affected by my actions should I be elected.

It would be an undue hardship to disclose all business customers from whom compensation in excess of the reporting threshold has been received whose identities are publicized or referenced in documents open for public inspection at the courts, in administrative hearings, at proceedings conducted by public agencies, or are a matter of public knowledge in other similar public forums. As explained below, the firm is composed of over 650 attorneys who work out of twenty one offices, in ten countries and on four continents. Attempting to compile this information would be an enormous burden and would not serve the underlying purpose of the Public Disclosure Act given the lack of connection of most of the firm's clients to my work in the Seattle office.

Modification Request #2: Personal Residence

I am additionally requesting a modification to the requirement to disclose the address of my personal residence as provided for in Wash. Admin. Code § 390-28-100(1)(d). I served as a United States Attorney for the Western District of Washington from October of 2009 until September of 2014. Due to my prior work as a federal prosecutor, there is a serious safety risk in disclosing the address of my personal residence. Therefore, I request that the PDC allow me to keep any description of the location of my personal residence confidential.

3. **UNREASONABLE HARDSHIP.** Describe in detail the manifestly unreasonable hardship in disclosing the information. Please describe in detail the reasons why you believe disclosing the information would be a hardship. The reasons stated should address the issues such as those listed below. Please address those topics below that are relevant to your specific request. For example, if you are seeking nondisclosure related to an entity, for each entity, please:

- Provide the name and description of the entity, business, union, association, not-for-profit, charitable organization, or other entity for which you are seeking a modification request from reporting the entity's disclosable customers/sources of compensation/income.

Quinn Emanuel Urquhart & Sullivan, LLP

- Describe the size of the entity such as annual sales, number of customers or accounts, the number of employees, and other pertinent information.

Quinn Emanuel is an international law firm with twenty one offices on four continents and in ten countries. The firm employs over 650 attorneys and is one of the 70 largest law firms in the United States. The Seattle office is only two years old and employs only three (one part-time) out of the over 650 lawyers.

- Describe how many business customers or other sources paying the entity more than \$12,000 would be subject to disclosure.

Hundreds, if not thousands.

- Describe if you have access to information about the entity's customer base or sources of compensation/income.

Access is very carefully controlled, but I can learn client names.

- Describe if you are involved with the day-to-day operations of the entity.

Not beyond the Seattle office, and only in a limited way there, as described below.

- Describe if any of the entity's customers or sources of compensation/income are already listed in other public sources or publications including advertisements, or public records.

Yes, some of the clients of the firm are listed on the firm's website or in other promotional materials. Clients are primarily disclosed in the individual attorney bios on the website, and it would be extremely difficult to go through all 650 of those and identify client names. The firm is primarily engaged in litigation, so many clients of the firm are also listed on public court records around the country and in other countries once a lawsuit is commenced. It would also be extraordinarily difficult to compile that information and it would risk invading the confidentiality of client representations that have not resulted in litigation. The attached Exhibit provides business and government clients that I or other members of the Seattle office of the law firm (the firm's only office in or within 500 miles of Washington State) have worked for and business and government clients with billing addresses in the State of Washington regardless of any connection to the Seattle office. There are no other clients of the law firm that I am aware of whose interests would be significantly affected by my actions should I be elected.

- Describe if any of the entity's customers or sources of compensation/income are already listed on a website.

See above.

- If the entity has a website address, list it here: <http://www.quinnemanuel.com/>
- If the entity's customers or sources of compensation/income are described elsewhere on the Internet, describe why you are seeking a modification (nondisclosure) for those customers or sources of compensation/income:

I do not have a full list of public websites where clients of the firm may be disclosed. The full list of publicly disclosed clients would be difficult to compile. My legal work while at the firm also bears no relation to the vast majority of these clients. Therefore, it would be an unreasonable hardship, and would not further the purpose of the Public Disclosure Act, for me to attempt to compile a full list of these clients.

[Note: along with other information provided in the Application Questionnaire, Internet information regarding entities/sources of compensation/income may be reviewed by PDC staff and/or the Commission as part of the modification process.]

- Describe if the entity has the ability to sort its customer list or sources of compensation/income to identify those paying the entity more than \$12,000 during the reporting period.

Yes, I could ask the accounting staff to identify such clients.

- Describe if you disclosed all of the governmental customers or governmental sources of compensation/income that paid the entity more than \$12,000 in the reporting period.

The attached Exhibit discloses all government clients for whom I or others in the Seattle office have performed legal work as well as governmental clients with billing addresses in the State of Washington regardless of any connection to the Seattle office. We have identified no Washington State government clients for whom others in the firm have done any work.

- Indicate whether you have an ownership interest of 10% or more in the entity. _____

No.

- Indicate whether your spouse's interest in an entity requires you to complete an F-1 Supplement for that entity.

Not applicable.

- Describe other relevant information you believe the Commission should consider as to why it would be a manifestly unreasonable hardship if the information was required to be disclosed.

As noted above, the Seattle office performs a very small amount of the total work performed by the firm as a whole, with only three out of over 650 firm lawyers working from that office. Attempting to compile a full list of all clients who paid the firm an amount above the reporting threshold and who are publicly disclosed somewhere would take an enormous amount of time and would result in disclosure of a large number of sensitive and often otherwise confidential relationships. The sensitive information would bear no relation to myself, my candidacy, or my potential future duties.



4. **NOT FRUSTRATE THE PURPOSES OF THE ACT.** Describe how allowing you to not disclose the information described in your modification request does not frustrate the purposes of the Public Disclosure Act.

As noted above, Quinn Emanuel is an international law firm and the Seattle office, like any small group of firm lawyers, performs only a small amount of the total work performed by the entity as a whole. I do not perform any legal work for, or have any involvement with, the vast majority of the firm's clients. In the general course of my standard practice I do not even have reason to know the identities of these clients. In seeking this modification, I am attempting to ensure full disclosure of the reportable clients with whom I have had any involvement with whatsoever while avoiding the unreasonable hardship that the standard reporting requirements would impose.



Washington

5. **DUTIES.** Describe your duties as an elected or appointed official. Please describe the jurisdiction or agency for which you hold public office, and the duties performed by you as a public official (examples: adopting rules or ordinances, hiring staff, approving contracts, setting policy, etc.). Please provide as much description as possible.

Not applicable.



6. **CUSTOMERS OR SOURCES OF COMPENSATION/INCOME.** If you are seeking a modification related to a particular entity's reportable customers or sources of compensation/income for an entity, describe:
- In detail the position you hold in the entity (examples: owner, board member, officer, partner, etc.) and the duties performed by you for that entity, if any (examples: setting policy, hiring, approving contracts, approving budgets, etc.). Please provide as much description as possible.

I am a partner in the Seattle office of the firm. Day to day management of the office is the responsibility of an administrator. I have no management role or ability to approve contracts for other offices.

- If you (or if you are seeking office, will you) make any decisions as a public official that may benefit the customers of the entity for which you are seeking a modification, or sources of compensation/income for the entity for which you are seeking a modification?

Clients whose interests could be significantly affected by my actions as Mayor, if elected, that I am aware of (if any) are disclosed in the attached Exhibit A.



7. **RESIDENTIAL ADDRESS.** Are you requesting to be exempted from disclosing the address of your personal residence in the Real Estate Section of the F-1? In this situation, you or your spouse may be a law enforcement officer, prosecutor, judge, or other official, and the disclosure of the address of your primary residence on the F-1 form could cause you or your family harm, based upon tangible evidence or a specific threat. If so, please explain in detail the **manifestly unreasonable hardship** if disclosure were required, and **why the purposes of the act would not be frustrated** if disclosure of the address was not required. If nondisclosure is based upon an anti-harassment or similar court order, please state.

I served as a United States Attorney for the Western District of Washington from October of 2009 until September of 2014. Due to this role, there is a serious safety risk in disclosing the address of my personal residence. Accordingly, my residence is part of the Address Confidentiality Program, a national program administered in Washington by the Secretary of State. See <https://www.sos.wa.gov/acp/>. I have disclosed all of the other requested information for the residence that is pertinent to meeting the goals of the Public Disclosure Act. It is only the location that I request to leave off the form for personal safety reasons. Therefore, I request that the PDC allow me to keep any description of the location of my personal residence confidential.



8. **SPOUSAL SEPARATION.** Are you requesting to be exempted from disclosing information related to your spouse based on a pending or recent divorce or separation, or bona fide separate property agreement or other bona fide separate status? In this situation, the filer has little or no knowledge of spouse's or former spouse's income, assets, liabilities or relationship to outside entities for which reporting may be required. (For example, do you file separate income tax returns?) The filer does not have access to spouse's or former spouse's financial information. The financial interest of the spouse or former spouse does not constitute a present or prospective source of income for the filer. If this is your situation, please describe.

Not applicable.



9. **OTHER INFORMATION.** Is there any other information you want the Commission to consider regarding your modification request? (If you are attaching any information or documents, please describe attachments.)

I am attaching an Exhibit of the clients of Quinn Emanuel that fall within the categories provided in #2 above.



- **IF YOU WILL NOT BE ATTENDING THE HEARING IN PERSON OR BY PHONE TO ATTEST THE ABOVE INFORMATION AND RESPOND TO COMMISSION QUESTIONS, YOU MUST ALSO COMPLETE AND SIGN THE ATTACHED CERTIFICATION PRIOR TO SUBMISSION.**

**Certification for an Application for a
Reporting Modification or Suspension
When Applicant Is Waiving Personal Appearance
At the Hearing
(Notary Not Required)**

I am waiving my personal appearance at the hearing on my request for a reporting modification or suspension, and request the Commission to consider my written application. I certify (or declare) under penalty of perjury under the laws of the State of Washington that the facts set forth in the attached application for a reporting modification are true and accurate to the best of my actual knowledge or belief.

List the date of the application request: May 23, 2017

Entity or name of individual
requesting reporting modification: Jenny A. Durkan

Your signature: 

Your printed name: Jenny A. Durkan

Business street address: 603 Stewart St. Suite 819

City, state and zip code: Seattle, WA 98101-1229

Telephone number: 206.905.7000.

E-Mail Address: jdurkan@mac.com

With copy to dburman@perkinscoie.com

Date Signed: May 23, 2017

Place Signed (City and County):

Seattle
City

King
County

*RCW 9A.72.040 provides that: "(1) A person is guilty of false swearing if he makes a false statement, which he knows to be false, under an oath required or authorized by law. (2) False swearing is a gross misdemeanor."

IF YOU FAX OR SCAN AND SEND A COPY OF THIS SIGNED CERTIFICATION VIA E-MAIL TO THE PDC WITH YOUR MODIFICATION REQUEST, THE ORIGINAL MUST STILL BE PROVIDED. RETURN THE ORIGINAL OF THIS CERTIFICATION TO:

**WASHINGTON STATE PUBLIC DISCLOSURE COMMISSION
711 Capitol Way Room 206
P.O. Box 40908
Olympia, WA 98504-0908
Attn: Reporting Modification Request**

**Jenny A Durkan
Modification Application Questionnaire
PDC Exhibit A**

Client Name	Purpose
Confederacion Sudamericana de Futbol (CONMEBOL)	Legal Services
Daimler AG	Legal Services
Dust Pro, Inc.	Legal Services
Esplanade Productions, Inc.	Legal Services
E*Trade Financial Corporation	Legal Services
FIFA	Legal Services
Google Inc.	Legal Services
Home Depot USA	Legal Services
IBM	Legal Services
Muckleshoot Indian Tribe	Legal Services
Port of Seattle	Legal Services
PPG Industries, Inc.	Legal Services
Rhapsody International	Legal Services
Rockefeller Family Fund	Legal Services
Spotify USA Inc.	Legal Services
State Farm Insurance Company	Legal Services
The Coca Cola Company	Legal Services
TV Eyes	Legal Services

PROVIDE INFORMATION FOR YOURSELF, SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD

Last Name DURKAN	First JENNY	Middle Initial A	DATE 2017-05-23
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A OFFICE HELD, BUSINESS INTERESTS: Provide the following information if, during the reporting period, you, your spouse, registered domestic partner or dependents

- (1) were an officer, director, general partner, trustee, or 10 percent or more owner of a corporation, non-profit organization, union, partnership, joint venture or other entity; and/or
- (2) were a partner or member of a limited partnership, limited liability partnership, limited liability company or similar entity, including but not limited to a professional limited liability company.

- Legal Name: Report name used on legal documents establishing the entity.
- Trade or Operating Name: Report name used for business purposes if different from the legal name.
- Position or Percent of Ownership: The office, title and/or percent of ownership held.
- Brief Description of the Business/Organization: Report the purpose, product(s), and/or the service(s) rendered.
- Payments from Governmental Unit: If the governmental unit in which you hold or seek office made payments to the business entity concerning which you're reporting, show the purpose of each payment and the actual amount received.
- Payments from Business Customers and Other Government Agencies: List each corporation, partnership, joint venture, sole proprietorship, union, association, business or other commercial entity and each government agency (other than the one you seek/hold office) which paid compensation of \$12,000 or more during the period to the entity. Briefly say what property, goods, services or other consideration was given or performed for the compensation.
- Washington Real Estate: Identify real estate owned by the business entity if the qualifications referenced below are met.

ENTITY NO. 1

Reporting For: Self Spouse
 Registered Domestic Partner Dependent

LEGAL NAME:

Quinn Emanuel, Urquhart & Sullivan, LLP

POSITION OR PERCENT OF OWNERSHIP

Attorney (Partner)

TRADE OR OPERATING NAME:

Quinn Emanuel, Urquhart & Sullivan, LLP

ADDRESS:

600 University Street, Suite 2800
 Seattle WA 98101

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

Law Firm

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:

Purpose of payments Amount (actual dollars)
 \$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:

Agency name: Purpose of payment (amount not required)


PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE

Customer name: Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

CONTINUE PARTS B AND C ON NEXT PAGES

 PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828	PDC FORM F-1 (1/15)	PERSONAL FINANCIAL AFFAIRS STATEMENT	PDC OFFICE USE 100761685 Covers: 5-23-2016: To: 5-23-2017 Received: 05-23-2017												
Refer to instruction manual for detailed assistance and examples. Deadlines: Incumbent elected and appointed officials -- by April 15. Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position.		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">DOLLAR CODE</th> <th style="text-align: left;">AMOUNT</th> </tr> <tr> <td>A</td> <td>\$1 to \$4,499</td> </tr> <tr> <td>B</td> <td>\$4,500 to \$23,999</td> </tr> <tr> <td>C</td> <td>\$24,000 to \$47,999</td> </tr> <tr> <td>D</td> <td>\$48,000 to 119,999</td> </tr> <tr> <td>E</td> <td>\$120,000 or more</td> </tr> </table>	DOLLAR CODE	AMOUNT	A	\$1 to \$4,499	B	\$4,500 to \$23,999	C	\$24,000 to \$47,999	D	\$48,000 to 119,999	E	\$120,000 or more	
DOLLAR CODE	AMOUNT														
A	\$1 to \$4,499														
B	\$4,500 to \$23,999														
C	\$24,000 to \$47,999														
D	\$48,000 to 119,999														
E	\$120,000 or more														
SEND REPORT TO PUBLIC DISCLOSURE COMMISSION															
Last Name DURKAN	First JENNY	Middle Initial A	Names of immediate family members, including registered domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for details.												
Mailing Address (Use PO Box or Work Address) 603 STEWART STREET SUITE 819															
City SEATTLE	County KING	Zip + 4 98101-1229													
Filing Status (Check only one box.) <input type="checkbox"/> An elected or state appointed official filing annual report <input type="checkbox"/> Final report as an elected official. Term expired: _____ <input checked="" type="checkbox"/> Candidate running in an election: month <u>AUG</u> year <u>2017</u> <input type="checkbox"/> Newly appointed to an elective office <input type="checkbox"/> Newly appointed to a state appointive office <input type="checkbox"/> Professional staff of the Governor's Office and the Legislature		Office Held or Sought Office title: <u>MAYOR</u> County, city, district or agency of the office, name and number: <u>CITY OF SEATTLE</u> Position number: _____ Term begins: <u>01-01-2018</u> ends: <u>12-31-2021</u>													
1 INCOME List each employer, or other source of income (pension, social security, legal judgment, etc.) from which you or a family member, including registered domestic partner, received \$2,400 or more during the period. Include stock options received during the reporting period that had a value of \$2,400 or more. (Report interest and dividends in Item 3 on reverse)															
Show Self (S) Spouse (SP/DP) Dependent (D)	Name and Address of Employer or Source of Compensation Quinn Emanuel, Urquhart & Sullivan, 600 University Street, Suite 2800 SEATTLE WA 98101	Occupation or How Compensation Was Earned Attorney (Partner)	Amount: (Use Code)												
Check Here <input type="checkbox"/> if continued on attached sheet															
2 REAL ESTATE List street address, assessor's parcel number, or legal description AND county for each parcel of Washington real estate with value of over \$12,000 in which you or a family member, including registered domestic partner, held a personal financial interest during the reporting period. (Show partnership, company, etc. real estate on F-1 supplement.)															
Property Sold or Interest Divested	Assessed Value (Use Code)	Name and Address of Purchaser	Nature and Amount (Use Code) of Payment or Consideration Received												
Property Purchased or Interest Acquired Request for Modification	E	Creditor's Name/Address Wells Fargo 999 3rd Avenue Seattle WA 98104	Payment Terms 7 year ARM at 3.125%												
All Other Property Entirely or Partially Owned S/2 E/2 NE SW FR 200-2281 Whidbey Island County Check here <input type="checkbox"/> if continued on attached sheet	E		Security Given Mortgage												
			Mortgage Amount - (Use Code) <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;">Original E</td> <td style="width:50%; text-align: center;">Current E</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> </tr> </table>	Original E	Current E	0	0								
Original E	Current E														
0	0														

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS List bank and savings accounts, insurance policies, stock, bonds and other intangible property (including but not limited to stock options) held during the reporting period.

A. Name and address of each bank or financial institution in which you or a family member, including registered domestic partner, had an account over \$24,000 any time during the report period.	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
1201 Third Avenue Seattle WA 98101	Checking & Savings	E	A
B. Name and address of each insurance company where you or a family member, including registered domestic partner had a policy with a cash or loan value over \$24,000 during the period.			
C. Name and address of each company, association, government agency, etc. in which you or a family member, including registered domestic partner, owned or had a financial interest worth over \$2,400. Include stocks, bonds, ownership, retirement plan, IRA, notes, stock options, and other intangible property. If you, your spouse, registered domestic partner and/or dependents had decision making authority regarding individual assets/investments list each asset or investment, the value and any income amount. EXAMPLE: If you self directed an investment account, identify each stock or other asset in that account. Seattle WA 98101	Defined Benefit Plan	D	0

Check here if continued on attached sheet.

4 CREDITORS List each creditor you or a family member, including registered domestic partner, owed \$2,400 or more any time during the period. Don't include retail charge accounts, credit cards, or mortgages or real estate reported in Item 2. **AMOUNT (USE CODE)**

Creditor's Name and Address	Terms of Payment	Security Given	Original	Present

Check here if continued on attached sheet.

5 All filers answer questions A thru D below. If the answer is YES to any of these questions, the F-1 Supplement must also be completed as part of this report. If all answers are NO and you are a candidate for state or local office, an appointee to a vacant elective office, or a state executive officer filing your initial report, no F-1 Supplement is required.

Incumbent elected officials and state executive officers filing an annual financial affairs report also must answer question E. An F-1 Supplement is required of these officeholders unless all answers to questions A thru E are NO.

- A. At any time during the reporting period were you, your spouse, registered domestic partner or dependents (1) an officer, director, general partner or trustee of any corporation, company, union, association, joint venture or other entity or (2) a partner or member of any limited partnership, limited liability partnership, limited liability company or similar entity including but not limited to a professional limited liability company? If yes, complete Supplement, Part A.
- B. Did you, your spouse, registered domestic partner or dependents have an ownership of 10% or more in any company, corporation, partnership, joint venture or other business at any time during the reporting period? If yes, complete Supplement, Part A.
- C. Did you, your spouse, registered domestic partner or dependents own a business at any time during the reporting period? If yes, complete Supplement, Part A.
- D. Did you, your spouse, registered domestic partner or dependents prepare, promote or oppose state legislation, rules, rates or standards for current or deferred compensation (other than pay for a currently-held public office) at any time during the reporting period? If yes, complete Supplement, Part B.
- E. **Only for Persons Filing Annual Report.** Regarding the receipt of items not provided or paid for by your governmental agency during the previous calendar year: 1) Did you, your spouse, registered domestic partner or dependents (or any combination thereof) accept a gift of food or beverages costing over \$50 per occasion? or 2) Did any source other than your governmental agency provide or pay in whole or in part for you, your spouse, registered domestic partner and/or dependents to travel or to attend a seminar or other training? If yes to either or both questions, complete Supplement, Part C.

<p>ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.</p> <p><input type="checkbox"/> I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns.</p> <p><input type="checkbox"/> I hold a local elected office. I have read and am familiar with RCW 42.17A.555 regarding the use of public facilities in campaigns.</p> <p>*CANDIDATES: Do not use public agency addresses or telephone numbers for contact information.</p>	<p>CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.</p> <p><u>Jenny A. Durkan</u> 05-23-2017 Signature Date</p> <p>Contact Telephone: 206-910-6962 *</p> <p>Email: <u>jdurkan@mac.com</u> (work)*</p> <p>Email: _____ (Home) Optional</p>
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FINANCIAL INSTITUTIONS CONTINUED

Name DURKAN, JENNY A

Page 3

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

A. Name and address of each bank or financial institution	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Wells Fargo 999 Third Avenue Seattle WA 98104	Checking & Savings	B	A
Check here <input type="checkbox"/> if continued on attached sheet.			

COMPANY, ASSOC., GOVERNMENT AGENCY CONTINUED

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Name DURKAN, JENNY A

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3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

C. Name and address of each company, association, government agency	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Merrill Lynch 401(k) & Profit Sharing 1215 4th Avenue Seattle WA 98161	Retirement Plan	E	0
Federal Thrift Savings Plan P.O. Box 385021 Birmingham AL 35238	Retirement Plan: G Fund -Govt Securities Inv Fund	E	0
The Riveter 1517 12th Avenue Seattle WA 98122	Private Investment	C	0
Wells Fargo Investment Advisors 777 108th Ave NE Bellevue WA 98004	IRA	E	0
Bessemer Trust 630 Fifth Ave New York NY 10111	Investment Management - Old Westbury Fund, Inc.	E	B
Bessemer Trust 630 Fifth Ave New York NY 10111	Cash - Money Market Sweep	E	A
Bessemer Trust 630 Fifth Ave New York NY 10111	Roth IRA - Old Westbury Fund, Inc.	E	0
Bessemer Trust 630 Fifth Ave New York NY 10111	Jenny Durkan, BENE of L Durkan IRA	D	A
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Money Market	D	A
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Costco Wholesale Co. (COST)	B	A
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Nanometrics Inc. (NANO)	B	0
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	Energy Select Sector SPDR ETF (XLE)	B	A

Check here if continued on attached sheet.

COMPANY, ASSOC., GOVERNMENT AGENCY CONTINUED

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Name DURKAN, JENNY A

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3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

C. Name and address of each company, association, government agency	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
Charles Schwab Brokerage Account 508 Union Street Seattle WA 98101	ETFs Gold Trust ETF (SGOL)	C	0

Check here if continued on attached sheet.