PUBLIC	DISCLOSURE COMMISSION 711 CAPITOL WA PO BOX 40908 OLYMPIA WA 988 (360) 753-1111 TOLL FREE 1-877	Y RM 206 504-0908	PDC FORM F-1 (11/18)		•	INANCIAL ATEMENT	O A S R T K	OFFICE USE	
Refer to insti	ruction manual for detailed essis	tance and exampl	es.	DOLLAR CODE		MOUNT	-DATE FILE	0400	
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. CD SEND REPORT TO PUBLIC DISCLOSURE COMMISSION					\$1 \$4 \$2 \$4	to \$4,499 ,500 to \$23,999 4,000 to \$47,999 8,000 to \$119,999 20,000 or more		2019	
Last Name	Firs		Middle	<u> </u>	· · · · · · · · · · · · · · · · · · ·		members, including	registeren	
Durkan		nny		Α.	domestic p disclose fo In your hou	partner. If there is or dependent child usehold, do not id	ino reportable information, or other dependentify them. Do ider stic partner. See F-1	nation to lents living ntify your	
Mailing Addr	ess (Use PO Box or Work Addre	988) *							
Offic	ce of the Mayor, P.O. Bo	x 9474 9						,	
City	Cou	•	Zlp + 4	1					
Sea		ng	98	124-4749	·				
	(Check only one box.)				Office Held	d or Sought			
An elec	ted or state appointed official filli	ng annual report			Office title	Mayor		•	
☐ Final re	port as an elected official. Term	expired:			County of	ty district or scen	yey of the office		
☐ Candida	ate running in an election: monti	h	year _		County, city, district or agency of the office, name and number: City of Spottion				
☐ Newly a	ppointed to an elective office				Position no	mher:	ty of Seattle		
☐ Newly a	ppointed to a state appointive of	ffice		•	Term begin	<u>IN/</u>			
Profess	lonal staff of the Governor's Offi	ce and the Legisla	iture		101111 20911	11/28/20	017 ends: 12/3	1/2021	
1	member, includi	ng registered de	rce of income (pen omestic partner, r lod that had a valu	eceived \$2.	400 or mai	re during the p	erlad. Include sta	ck ontlons	
Show Self (S) Spouse (SP/OP) Dependent (D)	Name and Address of Employe	er or Source of Co	mpensation	Occi	ipation or Ho as Earned	ow Compensation	Amount: (Use Code)		
S	City of Seattle P.O. Box 94749 Seattle, WA 98124			May	or/		E		
	Check Here [] If continued on								
2	REAL ESTATE real esta held a p F-1 supp	te with value of e ersonal financial lement.)	ssor's parcel num over \$12,000 in wi Interest during the	alch vou or	a family me	ember, including	realstered domes	tic partner.	
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Property Purc	chased or Interest Acquired		Creditor's Name/Addr	ess Paym	ient Terms	Security Given	Mortgage Amount - Original	(Use Code) Current	
	perty Entirely or Partially Owned								
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Uneck here L	If continued on attached sheet	Il					!	ı	

3	ASSETS / INVESTMENTS - INTEREST / DIVIDENDS Inta	ngible pro orting peri		not limited	policies, stoc to stock optic	k, bonds a ens) held d	ind other uring the
Α.	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.		Account or Description	n of Asset	Asset Value (Use Code)		Amount Code)
	JPM Chase 1201 Third Avenue, Seattle, WA 98101	Checking & Savings		E	А		
В.	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			fined Benefit Plan		E	0	
Che	eck here ⊠ if continued on attached sheet.						
4	CREDITORS List each creditor you or a family member, more any time during the period. Do mortgages or real estate reported in item 2	n't includ				AMO (USE (UNT CODE)
	Creditor's Name and Address		ms of Payment	Securi	ty Given	Original	Present
	•						
	eck here If continued on attached sheet.				<u>.</u>		
5	Filers answer questions A thru D below. If the answer is YES part of this report. If all answers are NO and you are a candidate executive officer filing your initial report, no F-1 Supplement is annual financial affairs report also must answer question E. A questions A thru E are NO.	te for state required. An F-1 Sup	o or local office, an a Incumbent elected oploment is required	ppointee to officials and of these of	a vacant elect I state executi ficeholders un	ive office, over officers	or a state filing an
A.	At any time during the reporting period were you, your spouse, registered domes corporation, company, union, association, joint venture or other entity or (2) a pa company or similar entity including but not limited to a professional limited liabili	idner or mer	nber of any limited partner	ship, limited lia	bility partnership.		ly
В.	Did you, your spouse, registered domestic partner or dependents have an owne business at any time during the reporting period? If yes, complete Supple			corporation, pa	artnership, joint ve	nture or othe	г
C.	Did you, your spouse, registered domestic partner or dependents own a business	s at any time	during the reporting period	od? If ye	s, complete Supp	lement, Part	Α.
ם	Did you, your spouse, registered domestic partner or dependents prepare, prom compensation (other than pay for a currently-held public office) at any time durin	g the reporti	e state legislation, rules, r ng period? if yes, c	ates or standar omplete Supple	rds for compensatement, Part B.	ion or deferre	d
Ε.	Only for Persons Filing Annual Report. Regarding the receipt of items not proyou, your spouse, registered domestic partner or dependents (or any combination any source other than your governmental agency provide or pay in whole or in passeminar or other training? Yes If yes to either or both questions, complete	n thereof) at	cept a gift of food or beve	rages costing o	over \$50 per occa	sion? <u>No</u> c	or 2) Did
AL	L FILERS EXCEPT CANDIDATES. Check the appropriate box.		CERTIFICATION:				
	I hold a state elected office, am an executive state officer or profession I have read and am familiar with RCW 42.52.180 regarding the use resources in campaigns.		information in this knowledge. I ackno constitute the offi commission and the	owledge that cial address at I_must_noti	t the email a	ddress her	ein shall with the
E	I hold a local elected office. I have read and am familiar with RCW 42 regarding the use of public facilities in campaigns.	2.17A.555	that address within to	HALL	<u> </u>	4-3 Date	-19
	NDIDATES: Do not use public agency addresses or telephone number tact information.	s for	Contact Telephone:	(206) * 684 n@seslile.gov	-4000	(Work)	
			Email:			(I lome)	.
<u> </u>			·				

Name DURKAN, JENNY A			Page 3
	-		
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)
3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS	Type of Account or Description of Asset Checking & Savings	Asset Value (Use Code) B	Income Amount
•			
Check here If continued on attached sheet.			

COMPANY, ASSOC., GOVERNMENT AGENCY CONTINUED

3 ASSETS / INVESTMENTS - INTERES	ST / DIVI	DENDS			-
C. Name and address of each company agency	, associ	ation, government	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
errill Lynch 401(k) & Profi	t Sha	ring	Retirement Plan	E	0
215 4th Avenue				1	
eattle	WA	98161			
ederal Thrift Savings Plan			Retirement Plan: G Fund -Govt Securities Inv	E	0
.O. Box 385021			Fund		
irmingham	AL	35238			
he Riveter			Private Investment	С	0
517 12th Avenue			i		
Seattle	WA	98122			
Vells Fargo Investment Advis	ors		IRA	E	0
777 108th Ave NE					
Bellevue	WA	98004			
Bessemer Trust			Investment Management -	E	В
330 Fifth Ave		•	Old Westbury Fund, Inc.		
lew York	ИА	10111			
Bessemer Trust			Cash & Short Term Money	E	В
330 Fifth Ave			Market		
New York	ИХ	10111			
Bessemer Trust			Roth IRA - Old Westbury	Е	A
630 Fifth Ave			Fund, Inc.		
New York	ИА	10111			
Bessemer Trust			Jenny Durkan, BENE of L	D	A
630 Fifth Ave			Durkan IRA		
New York	NY	10111			
Charles Schwab Brokerage Ac	count		Money Market	D	A
508 Union Street					
Seattle	WA	98101			
Charles Schwab Brokerage Ac	count		Costco Wholesale Co. (COST)	В	A
508 Union Street Seattle	WA	98101			
Charles Schwab Brokerage Ac	count		Nanometrics Inc. (NANO)	В	0
508 Union Street					
Seattle	AW	98101			
Charles Schwab Brokerage Ac	count		Energy Select Sector	В	A
508 Union Street			SPDR ETF (XLE)	1	
Seattle	WA	98101			

3 ASSETS / INVESTMENTS - INTE	REST / DIV	IDENDS			
 Name and address of each compagency 	oany, assoc	dation, government	Type of Account or Description of Asset	Asset Value (Use Code)	income Amoun (Use Code)
Charles Schwab Brokerage <i>I</i> 508 Union Street	Account		ETFS Gold Trust ETF (SGOL)	С	0
Seattle	WA	98101			
	,,,,		•		
l(x) Investments L42 W 57th Street			Private Investment	E	0
lew York	NY	10019			
				,	
	•				
			·		
				!	



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

CONTINUE PARTS B AND C ON NEXT PAGE

PROVIDE INFORMATION FOR YOURSELF, SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD Last Name First Middle Initial DATE 4/1/2019 Durkan Jenny Α. OFFICE HELD. Provide the following information if, during the reporting period, you, your spouse, registered domestic partner or **BUSINESS** dependents (1) were an officer, director, general partner, trustee, or 10 percent or more owner of a corporation, non-profit INTERESTS: organization, union, partnership, joint venture or other entity; and/or 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. Reporting For; Self Spouse **ENTITY NO. 1** Registered Domestic Partner Dependent POSITION OR PERCENT OF OWNERSHIP LEGAL NAME: 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: Purpose of payment (amount not required) Agency name: PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE Purpose of payment (amount not required) Customer name: 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 T if continued on attached sheet

F-1 Supplement

Jenny A. Durkan			_			
ENTITY NO.	. 2		·	Self Spouse D	pendent	
LEGAL NAM	NE:		•	OR PERCENT OF OWNE	•	
TRADE OR	OPERATING NA	AME:				
ADDRESS:						
BRIEF DES	CRIPTION OF T	HE BUSINESS/ORGANIZATION:	é			
PAYMENTS		VED FROM GOVERNMENTAL UNIT of payments	IN WHICH YOU SEEK/HOLD OFFICE:	Amount (actual dollars)		
				\$		
PAYMENTS	ENTITY RECEI Agency I	VED FROM OTHER GOVERNMENT name:	AGENCIES OF \$12,000 OR MORE:	Purpose of payment (amou	nt not required)	
PAYMENTS		VED FROM BUSINESS CUSTOMER er name:	S OF \$12,000 OR MORE	Purpose of payment (amou	int not required)	
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Check here] if continued on at	ached sheet				
В	OBBYING:	prepared state legislation or state	any immediate family member, includin rules, rates, or standards for compensa ch you are an elected official or professio	lon or deferred compense	tner, lobbled or tion. Do not list	
	Person to Who	m Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)		
Check here	If continued on at	lached sheet				
	OOD RAVEL EMINARS	portion of the following items to thereof: 1) Food and beverages of	other than your own governmental ager you, your spouse, registered domestic costing over \$50 per occasion, excluding) Seminars, educational programs or othe	partner or dependents, o certain receptions as defi	r a combination	
Date Received	Donor's	Name, City and State	Brief Description	Actual Dollar	Value (Use Code)	
7/22-7/26/18	Bloomberg I New York, I	tarvard City Leadership Initiative IY	Bloomberg Hervert City Leadership Inhibitive offers leadership and management behing up to 40 mayors from around the world, and senior officials from each mayor's City who are most crucial to affe organizational change. Over the course of a year, the program Col an intensive cissroom experience with broader training and cope building to help each participating mayor and senior beader loster.	to two Silito nbine: \$ 1,539,40	Α Α	
9/12/16-9/13/16	United Netions Foun San Francisco, CA	dador - Clobal Climate Action Stirmini	their professional growth and advance key sepablishes within their city half. The Global Climate Action Summit brugs leaders and people logs around the world to celebrate the extraordinary achievements of sergions, clilles, compenies, investors and clitzens with respect to o	ors and people together final / active vennents of states, \$830.26		
Check here	il continued on at	tached sheet	action. It was also a faunchpad for deeper worldwide commitment accelerated action from countries - supported by all sectors of sec can put the globe our track to prevent dangernus currets change a the historic Paris Agraement.	ety- thet	<u>-</u>	

Information Continued

F-1 Supplement

Ivaille	Jenny A. Durkan			
ENTITY NO.			olf Spouse Domestic Partner De	ependent 🔲
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TRADE OR C	PERATING NAME:			,
BRIEF DESC	RIPTION OF THE BUSINESS/ORGANIZATION			
PAYMENTS	ENTITY RECEIVED FROM GOVERNMENTAL UNIT Purpose of payments	· · · · · · · · · · · · · · · · · · ·	nount (actual dollars)	
PAYMENTS	ENTITY RECEIVED FROM OTHER GOVERNMENT Agency name:		rpose of payment (amou	nt not required)
PAYMENTS	ENTITY RECEIVED FROM BUSINESS CUSTOMER Customer name:		rpose of payment (amou	unt not required)
WASHINGTO and assessed	ON REAL ESTATE IN WHICH ENTITY HELD A DIF I value of property is over \$24,000. List street addre	RECT FINANCIAL INTEREST (Complete only If ss, assessor parcel number, or legal description	ownership in the ENTIT and county for each pare	Y is 10% or more cel):
В ь	BBYING: (Continued)			
	Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation	(Use Code)
TR	OD AVEL MINARS (continued)			
Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
0/27-10/29/2018	Aspen institute American Ctiles initiative - Detroit CityLab	A partnership between Bloomberg Philanthropies, the Asper institute and The Alientic CityLab is the preeminent meeting of the 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 09	A
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Washington State Public Disclosure Commission

Personal Financial Affairs Statement
Reporting Modification Application Questionnaire, Instructions And Certification

DATE FILED POC
June 2017

APR 11 2018

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 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 (<u>except</u> 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, <u>F-1 forms</u> 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."
- <u>Competitive disadvantage</u>. 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 <u>individual</u> 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 <u>only</u> nondisclosure of a residential address, answer # 1, # 4, # 6 and # 8.
- SPOUSAL SEPARATION. If you are seeking <u>only</u> 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

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-forprofit, 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 Urguhart & 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. <u>CONFLICT RECUSAL</u>. 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?

X	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.

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 regarding my request for a reporting modification or suspension, and request that the Commission consider the information provided in 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: April 4, 2018

Entity or name of	f individual
-------------------	--------------

requesting reporting modification. Jenny A. Durkan, Mayor of Seattle

Your signature:

Your printed name: Jenny A. Durka

Business street address: 600 4th Avenue

City, state and zip code: 98124-4749

Telephone number: (206) 684-4000

E-Mail Address: jenny.durkan@seattle.gov With copy to dburman@perkinscoie.com

Date Signed: March 28, 2018

Place Signed (City and County):

Seattle

King,

City

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 Statistics
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	DISCLO	SURE COMMISSION		PDC FORM					PDC	OFFICE USE
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		OLYMPIA WA 98	504-0908		1		ATEMENT	J		
	-	(360) 753-1111		(1/15)	AFF	AIRS SI	AICIVIENI	.		
		TOLL FREE 1-87	7-601-2828	<u> </u>	ļ <u>.</u>		·	p	\TE	Ell En
Refer to inst	truction manu	al for detailed assis	stance and example	es.	CO		AMOUNT	بري	ME.	FILED PD
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			-		Ì		48,000 to 119,999			•
SEND RE	PORT TO P	UBLIC DISCLOS	SURE COMMISS	ION	E	\$	120,000 or more	.]		
Last Name		Firs	it	Middle	e Initial		f immediate family			
DURKAN			NNY	A		disclose f	partner. If there is or dependent child busehold, do not ic r registered dome	dren, or oth dentify them	er dep ı. Do i	endents living dentify your
Mailing Add	ress (Use PO	Box or Work Addr	ess)			į .				
OFFICE	OF THE M	AYOR, P.O.	BOX 04740				,			
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SEATTLE		KI	NG	9812	24-474					
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_						Term begi	ns: 11-28-20	end 17	s: <u>12</u>	2-31-2021
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1	INCOME	List each empl	oyer, or other so including regist	urce of income (pension,	social securi	ty, legal judgme	ent, etc.) fr	om w	hich you or a
•		options receive	ed during the (reporting period	that ha	id a value	of \$2,400 or n	nore. (R	eport	interest and
Show Self (S)										
Spouse (SP/DP)			er or Source of Com		0	•	ow Compensation		Amo	
Dependent (D)		_	hart & Sull	-	`	Was E	arned	ı	(Use C	Code)
S	SEATTLE	ersity Stre	et, Suite 2	•	Attorn	ev			E	
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S	_	Seattle			Mayor	* _ *			В	' i
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	SEATTLE		WA 981	.24						
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		List stre	et address, asses	sor's narcel num	her or le	anal description	AND county	for each n		of Washington
2	REAL ESTA	TE real esta	te with value of c	ver \$12,000 in w	hich you	or a family m	nember. Includin	a reaistere	arcei (ed dor	nestic partner.
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3	ASSETS / INVESTMENTS - INTEREST / DIVIDENDS	List ban intangibl reporting	k and savings accounts, in le property (including but no g period.	surance poi t limited to s	licies, stock, l stock options)	oonds and held durin	other g the
Α	or a family member, including registered domestic partner, t	nad	Type of Account or Description		Asset Value (Use Code)	Income (Use C	Amount
В.	an account over \$24,000 any time during the report period. JPM Chase 1201 Third Avenue Seattle WA Name and address of each insurance company where you or a member, including registered domestic partner had a policy a cash or loan value over \$24,000 during the period.	98101 family	Checking & Savings	5	E	Ā	· ·
C.	agency, etc. in which you or a family member, incregistered domestic partner, owned or had a financial is worth over \$2,400. Include stocks, bonds, owner tirement plan, IRA, notes, stock options, and other interproperty. If you, your spouse, registered domestic partner dependents had decision making authority regarding ind assets/investments list each asset or investment, the value are income amount. EXAMPLE: If you self directed an inverse account, identify each stock or other asset in that account.	cluding nterest ership, angible and/or lividual nd any stment	Defined Benefit Plan	-	E	0	
	Quinn Emanuel Defined Benefit Plan	ł			-	Ū	
l	O University Street, Suite 2800 Seattle WA 9	8101	*	,	·		
4	List each creditor you or a family r CREDITORS or more any time during the peri or mortgages or real estate reported	od. Dor	n't include retail charge a	tic partner, ccounts, cr	owed \$2,400 edit cards,		OUNT CODE)
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5	All filers answer questions A thru D below. If the answer part of this report. If all answers are NO and you are a cexecutive officer filing your initial report, no F-1 Supplementary.	andidate	for state or local office, an a	ne F-1 Suppl appointee to	ement must al a vacant elect	so be com ive office, o	pleted as or a state
	Incumbent elected officials and state executive officer Supplement is required of these officeholders unless all	answers	to questions A thru E are N	0.			1
Α.	At any time during the reporting period were you, your spouse, registered company, union, association, joint venture or other entity or (2) a partner entity including but not limited to a professional limited liability company?	er or membe	er of any limited partnership, limite	er, director, ger ed liability partr	neral partner or tr nership, limited lia	ustee of any ability compa	corporation, ny or similar
B.	Did you, your spouse, registered domestic partner or dependents have a at any time during the reporting period? If yes, complete Supplement	n ownershi L Part A.	ip of 10% or more in any company	, corporation, p	partnership, joint v	enture or oth	ner business
C.	Did you, your spouse, registered domestic partner or dependents own a b						
D.	Did you, your spouse, registered domestic partner or dependents prepar (other than pay for a currently-held public office) at any time during the re	e, promote porting peri	or oppose state legislation, rules, iod? If yes, complete Supplement	rates or stand ent, Part B.	ards for current o	r deferred co	mpensation
E.	Only for Persons Filing Annual Report. Regarding the receipt of items your spouse, registered domestic partner or dependents (or any combinany source other than your governmental agency provide or pay in who attend a seminar or other training? No If yes to either or both question	nation there le or in par	eof) accept a gift of food or bever t for you your spouse, registered	ages costing o	ver \$50 per occ	asion? No	or 2) Did
ALI	FILERS EXCEPT CANDIDATES. Check the appropriate box.		CERTIFICATION: I	certify und	ler penalty of	perjury	that the
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Ŋ	I hold a local elected office. I have read and am familiar with F regarding the use of public facilities in campaigns.	RCW 42.1	Signature	1 4	1000	Date	<u> </u>
	,	•	Contact Telephone. Email: <u>jenny.dur</u>			 (work)*	
*CA	NDIDATES: Do not use public agency addresses or telephonact information.	ie numbei		ascat		(Work) (Home) (Optional
			REPORT NOT ACC	EPTABLE	WITHOUT FII	ER'S SIG	NATURE

FINANCIAL INSTITUTIONS CONTINUED

DURKAN, JENNY A 3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS Income Amount (Use Code) Asset Value Name and address of each bank or financial institution Type of Account or Description of Asset (Use Code) В Α Checking & Savings Wells Fargo 999 Third Avenue Seattle WA 98104 Check here \square if continued on attached sheet.

Name DURKAN, JENNY A	***	-			Page 4
3 ASSETS / INVESTMENTS - IN	TEREST / DI	VIDENDS			
C. Name and address of each co agency	mpany, asso	ciation, government	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
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Seattle	WA	98161			
Federal Thrift Savings P	lan		Retirement Plan: G Fund	E	0
P.O. Box 385021			-Govt Securities Inv Fund		
Birmingham	AL	35238	rund	-	
The Riveter			Private Investment	l c	0
1517 12th Avenue					
Seattle	_ WA	98122			
Wells Fargo Investment Ad	dvisors		IRA .	E	0
777 108th Ave NE			· ,	· .	
Bellevue	WA	98004	ì		
Bessemer Trust		,	Investment Management -	E	D ·
630 Fifth Ave			Old Westbury Fund, Inc.		
New York	NY	10111	,		
Bessemer Trust			Cash - Money Market	E	В
630 Fifth Ave			Sweep		
New York	NY	10111			
Bessemer Trust			Roth IRA - Old Westbury	E	0 ,
630 Fifth Ave			Fund, Inc.		
New York	NY	10111			
Bessemer Trust			Jenny Durkan, BENE of L	D	A
630 Fifth Ave			Durkan IRA		
New York	NY	10111			
Charles Schwab Brokerage	Account		Money Market	D	A
508 Union Street					
Seattle	WA	98101	•		
Charles Schwab Brokerage	Account		Costco Wholesale Co.	В	A
508 Union Street Seattle	7.7%	00101	(5551)		
Deact16	WA.	98101			
Charles Schwab Brokerage	Account		Nanometrics Inc. (NANO)	В	0
508 Union Street					
Seattle '	WA	98101			
Charles Schwab Brokerage	Account		Energy Select Sector	В	A
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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

SUPPLEMEN (1/15)

SUPPLEMENT PAGE

PERSONAL FINANCIAL AFFAIRS STATEMENT

CONTINUE PARTS B AND C ON NEXT PAGES

Last Name		First	Middle Initial		DATE
DURKAN		JENNY	A		04-04-2018
Α	OFFICE HELD, BUSINESS INTERESTS:	organization, union, partne (2) were a partner or membe	if, during the reporting period, you general partner, trustee, or 10 perc ership, joint venture or other entity; a er of a limited partnership, limited t not limited to a professional limited	cent or mor ind/or liability part	re owner of a corporation, non-prof
	• Legal	Name: Report name used on legal doo		nubinity	ipany.
		e or Operating Name: Report name use		rom the lega	al name.
	 Position 	on or Percent of Ownership: The office	, title and/or percent of ownership he	eld.	
ı		Description of the Business/Organization			
	entity	tents from Governmental Unit: If the g concerning which you're reporting, show	w the purpose of each payment and	the actual a	amount received.
	proprie seek/h service	ents from Business Customers and O letorship, union, association, business hold office) which paid compensation o less or other consideration was given or p ington Real Estate: Identify real estate	or other commercial entity and eac of \$12,000 or more during the period performed for the compensation.	ch governm I to the enti	nent agency (other than the one yo ity. Briefly say what property, goods
ENTITY NO.	.1	-	. Reporting Fc	or: Self X	Spouse
			Registered D	omestic Pa	rtner Dependent D
LEGAL NAME	Æ:		POSITI	ON OR PER	RCENT OF OWNERSHIP
Quinn Em	manuel, Urquh	art & Sullivan, LLP	Atto		
Quinn Em		art & Sullivan, LLP			•
600 Univ	versity Street	t, Suite 2800		4	
Seattle			WA 98101		
BRIEF DESC	CRIPTION OF THE BL	USINESS/ORGANIZATION:			
Law Firm	a				
		1			
PAYMENTS E	ENTITY RECEIVED F Purpose of pay	FROM GOVERNMENTAL UNIT IN WHI yments	CH YOU SEEK/HOLD OFFICE:	Amount (a	actual dollars)
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PAYMENTS E		FROM BUSINESS CUSTOMERS OF \$1		Durnose c	of payment (amount not required)
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WASHINGTO	ON REAL ESTATE IN	WHICH ENTITY HELD A DIRECT FINA over \$24,000. List street address, asset	ANCIAL INTEREST (Complete only i	if ownership	o in the ENTITY is 10% or more unty for each parcel):
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View/Print/Save F1 as PDF

View/Print/Save F19 as PDF



Exit "

Start Here

1 - Income

3 - Assets/Invest - Int/Div

4 - Creditors

5 - Questions

Certification and Declaration



FILER RESOURCES

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

> Copyright © 2007 Public Disclosure Commission 711 CAPITOL WAY #206 / PO BOX 40304 /OLYMPIA WA 93504-0908



Check here I if continued on attached sheet

711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111

PDC FORM

PERSONAL FINANCIAL AFFAIRS STATEMENT

PDC OFFICE USE

DATE FILED PDC TOLL FREE 1-877-601-2828 DOLLAR Refer to instruction manual for detailed assistance and examples. MAY 23 2017 CODE **AMOUNT** \$1 to \$4.499 Incumbent elected and appointed officials -- by April 15. Deadlines: \$4,500 to \$23,999 В Candidates and others -- within two weeks of becoming a \$24,000 to \$47,999 C candidate or being newly appointed to a position. D \$48,000 to 119,999 \$120,000 or more SEND REPORT TO PUBLIC DISCLOSURE COMMISSION Middle Initial Names of immediate family members, including registered First Last Name domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living Α DURKAN **JENNY** in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for Mailing Address (Use PO Box or Work Address) 603 STEWART STREET SUITE 819 Zip + 4City County 98101-1229 KING SEATTLE Office Held or Sought Filing Status (Check only one box.) Office title: MAYOR An elected or state appointed official filing annual report Final report as an elected official. Term expired: County, city, district or agency of the office, X Candidate running in an election: month <u>AUG</u> year 2017 name and number: CITY OF SEATTLE Newly appointed to an elective office Position number: Term begins: 01-01-2018Newly appointed to a state appointive office ends: 12-31-2021 Professional staff of the Governor's Office and the Legislature 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 **INCOME** 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) Attorneypation or How Compensation Ameunt: Name and Address of Employeth Source of Gompensation Spogse (SP/DP) (Use Code) Was Earned Dependent (D) 600 University Street, Suite 2800 SEATTLE 98101 Check Here [] if continued on attached sheet 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, **REAL ESTATE** held a personal financial interest during the reporting period. (Show partnership, company, etc. real estate on F-1 supplement.) Nature and Amount (Use Code) of Payment or Name and Address of Purchaser Assessed **Property Sold or Interest Divested** Consideration Received Value (Use Code) Security Given Mortgage Amount - (Use Code) **Payment Terms** Creditor's Name/Address Property Purchased or Interest Acquired Current Original 7 year ARM E Mortgage Wells Fargo Request for Modification Е 999 3rd Avenue at 3.125% Seattle WA 98104 All Other Property Entirely or Partially Owned 0 0 Е S/2 E/2 NE SW FR 200-2281 Whidbey Island County

3	ASSETS / INVESTMENTS - INTEREST / DIVIDENDS	intangib	nk and sa le proper g period.	vings accounts, in ty (including but no	surance pol limited to s	icies, stock, b stock options) l	onds and held during	other the
A. B.	Name and address of each bank or financial institution in which you or a family member, including registered domestic partner, had appacoing ser \$24,000 any time during the report period. 1201 Third Avenue Seattle WA 98101 Name and address of each insurance company where you or a family			pe of Account or Description of Asset Val (Use Code necking & Savings				
ь.	member, including registered domestic partner had a policy a cash or loan value over \$24,000 during the period.			•				
C.	Name and address of each company, association, gover agency, etc. in which you or a family member, in registered domestic partner, owned or had a financial worth over \$2,400. Include stocks, bonds, own retirement plan, IRA, notes, stock options, and other into property. If you, your spouse, registered domestic partner dependents had decision making authority regarding into assets/investments list each asset or investment, the value as income, amount in EXAMPLE: If you self firected and investigating that appoint. Seattle WA 98101	icluding interest nership, tangible and/or dividual and any	Define	Fined Benefit Plan D		D	0	
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4	List each creditor you or a family CREDITORS or more any time during the per or mortgages or real estate reporte	riod. Do	on't inclu	g registered domes de retail charge a	tic partner, ccounts, c	owed \$2,400 redit cards,		OUNT CODE)
	Creditor's Name and Address	ea in item		ns of Payment	Secur	ity Given	Original	Present
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	eck here if continued on attached sheet. All filers answer questions A thru D below. If the answer	ver is YE	S to any o	f these questions, t	he F-1 Supp	lement must a	lso be com	pleted as
5	part of this report. If all answers are NO and you are a executive officer filing your initial report, no F-1 Supple	candidat	te for stat	e or local office, an	appointee to	o a vacant elec	tive office,	or a state
	Incumbent elected officials and state executive offic Supplement is required of these officeholders unless a	ali answe	rs to ques	stions A thru E are N	10.			
A.	At any time during the reporting period were you, your spouse, register company, union, association, joint venture or other entity or (2) a part entity including but not limited to a professional limited liability company	tnerormen y? <u>X</u> Ifyo	nber of any es, complet	limited partnership, limi e Supplement, Part A.	ted liability par	rtnersnip, limited i	lability comp	any or simila
В.	Did you, your spouse, registered domestic partner or dependents have at any time during the reporting period? If yes, complete Supplemental period? If yes, complete Supplemental period?	ent, Part A.		,				
C.	Did you, your spouse, registered domestic partner or dependents own							
D.	Did you, your spouse, registered domestic partner or dependents pref (other than pay for a currently-held public office) at any time during the	reporting p	period?	If yes, complete Supple	ment, Part B.			
E.	Only for Persons Filing Annual Report. Regarding the receipt of ite your spouse, registered domestic partner or dependents (or any con source other than your governmental agency provide or pay in whole seminar or other training? If yes to either or both questions, compl	nbination the or in part	nereof) acce for you, you	ept a gift of food or bev Ir spouse, registered do	erages costing	over \$50 per oc	casion?	or 2) Did any
ALI	L FILERS EXCEPT CANDIDATES. Check the appropriate box.	•		CERTIFICATION:	I certify u	nder penalty contained in th	of perjury	that the
	I hold a state elected office, am an executive state officer or properties of any state elected officer, am an executive state officer or properties of any state of the state	rofessiona the use o	al staff. I of public			e best of my kn		
	I hold a local elected office. I have read and am familiar with	h RCW 42	2.17A.555				<u></u>	
	regarding the use of public facilities in campaigns.			Signature			Date	_ _
				Contact Telephone:			*	
				Email:				
1	ANDIDATES: Do not use public agency addresses or telephatact information.	hone num	bers for	Email:			(Home	Optional

DURKAN, JENNY	<u> </u>				3
ASSETS / INVESTME	NTS - INTEREST / D	IVIDENDS	•		
. Name and address of each	n bank or financial ins	titution	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amoun (Use Code)
ells Fargo 99 Third Avenue eattle	WA	98104	Checking & Savings	В	A
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3 ASSETS / INVESTMENTS - INTERE	ST / DIV	IDENDS			4
C. Name and address of each compan agency	y, assoc	iation, government	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amoun (Use Code)
Merrill Lynch 401(k) & Prof:	it Sha	ring	Retirement Plan	E	0
215 4th Avenue		•	'	-	
Seattle	WA	98161			
Federal Thrift Savings Plan		,	Retirement Plan: G Fund -Govt Securities Inv	E	0
P.O. Box 385021			Fund		
Birmingham	AL	35238			
The Riveter			Private Investment	С	0
517 12th Avenue			· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		
Seattle	WA	98122			
Vells Fargo Investment Advi	sors		IRA	E	0
777 108th Ave NE					
Bellevue	WA	98004			
Bessemer Trust			Investment Management -	E	В
30 Fifth Ave			Old Westbury Fund, Inc.		
New York	NY	10111			
Bessemer Trust	-		Cash - Money Market	E	A
330 Fifth Ave			Sweep		
New York	NY	10111			
Bessemer Trust			Roth IRA - Old Westbury	E	0
330 Fifth Ave			Fund, Inc.		
New York	NY	10111		,	
Bessemer Trust			Jenny Durkan, BENE of L	D	A
330 Fifth Ave			Durkan IRA		
New York	NY	10111	•		
Charles Schwab Brokerage Ac	count		Money Market	D	A
508 Union Street					
Seattle	WA	98101			
Charles Schwab Brokerage Ac	count		Costco Wholesale Co.	В	A
508 Union Street			(COST)		
Seattle	WA	98101		, ,	
Charles Schwab Brokerage Ac	count		Nanometrics Inc. (NANO)	В	0
508 Union Street					
Seattle	WA	98101			
Charles Schwab Brokerage Ac	count		Energy Select Sector	В	A
508 Union Street			SPDR ETF (XLE)		
Seattle	WA	98101	·		
	*	ř			

COMPANY, ASSOC., GOVERNMENT AGENCY CONTINUED

F-1

3				· "	
		NTEREST / DIVIDENDS ompany, association, government	Type of Account or Description of Asset	Asset Value	Income Amoun
	agency			(Use Code)	(Use Code)
	arles Schwab Brokerage 3 Union Street	Account	ETFS Gold Trust ETF (SGOL)	С	0
	attle	WA 98101			
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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, <u>F-1 forms</u> 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."
- <u>Competitive disadvantage</u>. 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 <u>individual</u> 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: 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 <u>only</u> nondisclosure of a residential address, answer # 1, # 4, # 6 and # 8.
- SPOUSAL SEPARATION. If you are seeking <u>only</u> 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.



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



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 SUPPLEMENT

(<u>1/15)</u>

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SUPPLEMENT PAGE

PERSONAL FINANCIAL AFFAIRS STATEMENT

CONTINUE PARTS B AND C ON NEXT PAGES

05-23-2017

PROVIDE INFORMATION FOR YOURSELF,	SPOUSE, REGISTERED DO	OMESTIC PARTNER, DEF	PENDENT CHILDREN AN	ND OTHER DEPENDENTS IN
YOUR HOUSEHOLD				

Last Name	;	First	Middle Initial	DATE
DURKAN		JENNY	A	2017-05-23
Α	OFFICE HELD, BUSINESS INTERESTS:	dependents	if, during the reporting period, you, your sp	

- organization, union, partnership, joint venture or other entity; and/or
- 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 busines	•
ENTITY NO. 1	Reporting For: Self X Spouse
	Registered Domestic Partner Dependent
LEGAL NAME:	POSITION OR PERCENT OF OWNERSHIP
Quinn Emanuel, Urquhart & Sullivan, LLP	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/HOLI Purpose of payments	D OFFICE: Amount (actual dollars) \$
PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR Agency name:	MORE: 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 (and assessed value of property is over \$24,000. List street address, assessor parcel number, or	
Check here ☐ if continued on attached sheet	

DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111

TOLL FREE 1-877-601-2828

(1/15)

PDC FORM

PERSONAL FINANCIAL **AFFAIRS STATEMENT**

PDC OFFICE USE

100761685

Covers:

5-23-2016: To:

Received.

5-23-2017

DOLLAR Refer to instruction manual for detailed assistance and examples. CODE **AMOUNT** \$1 to \$4,499 Incumbent elected and appointed officials -- by April 15. Α Candidates and others -- within two weeks of becoming a В \$4,500 to \$23,999 С \$24,000 to \$47,999 candidate or being newly appointed to a position.

SEND DEE		DISCLOSURE COMM	ISSION	D E		,000 to 119,999 0,000 or more	05-23-2017	
Last Name	ONT TO PUBLIC I	First	Middle		· · · · ·		L bers, including registered	
DURKAN		JENNY	A	,	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 Addr	ess (Use PO Box or V	Vork Address)			1			
603 STEW	VART STREET SU	JTTE 819						
City		County	Zip + 4	1	<u> </u>			
SEATTLE		KING	9810)1-1229				
Filing Status	(Check only one box.)			Office Held	or Sought		
An elect	ted or state appointed	official filing annual repo	t		Office title:	MAYOR		
Final rep	port as an elected offic	cial. Term expired:			0		H 60°	
X Candida	ate running in an electi	on: month <u>AUG</u>	year <u>:</u>	2017		, district or agency of	OF SEATTLE	
☐ Newly a	ppointed to an elective	e office						
☐ Newly a	ppointed to a state ap	pointive office			Position number: NA NA NA NA NA NA NA NA NA N			
Profess	ional staff of the Gove	rnor's Office and the Leg	islature		Term begin	01-01-2018	ends: $12-31-2021$	
	l ist e	ach employer, or othe	r source of income (nension, so	cial security	v legal judgment e	tc.) from which you or a	
1	INCOME family option		egistered domestic p ne reporting period	artner, rece	eived \$2,400	or more during the	he period. Include stock	
Show Self (S) Spo@se (SP/DP)	Name and Address	of Employer or Source of	Compensation	Attor 96		w ₂ Compensation	Am <u>e</u> unt:	
Dependent (D)		ty Street, Suit			Was Earne	ed	(Use Code)	
	SEATTLE	WA	98101					
	_							
	Check Here ☐ if cor	ntinued on attached shee						
2	REAL ESTATE	real estate with value	of over \$12,000 in w	hich you o	r a family m	ember, including re	ach parcel of Washington gistered domestic partner, pany, etc. real estate on F-	
Proporty Colo	d or Interest Divested	1 supplement.) Assessed	Name and Address o	f Durahagar		Noture and Amount (Use Code) of Payment or	
Troperty 3010	d or Interest Divested	Value	I valle and Address 0	i i uicilasti		Consideration Receiv		
		(Use Code)						
Droporty Dur	chased or Interest Acqu	ired	Creditor's Name/Add	ress Pavn	nent Terms	Security Given Mo	ortgage Amount - (Use Code)	

Original Current 7 year ARM Request for Modification Ε Wells Fargo Ε Ε Mortgage 999 3rd Avenue at 3.125% Seattle WA 98104 All Other Property Entirely or Partially Owned S/2 E/2 NE SW FR 200-2281 Ε 0 0 Whidbey Island County Check here ☐ if continued on attached sheet

3	ASSETS / INVESTMENTS - INTEREST / DIVIDENDS		savings accounts, insurance policies, stock, bonds and other erty (including but not limited to stock options) held during the d.						
A.	Name and address of each bank or financial institution in whis or a family member, including registered domestic partner, har paccount over \$24,000 any time during the report period. 1201 Third Avenue Seattle WA 98101	ad	Account or Description		Asset Value (Use Code) E	Income (Use C A			
B.	Name and address of each insurance company where you or a member, including registered domestic partner had a policy a cash or loan value over \$24,000 during the period.								
C.	Name and address of each company, association, gover agency, etc. in which you or a family member, incregistered domestic partner, owned or had a financial in worth over \$2,400. Include stocks, bonds, owneretirement plan, IRA, notes, stock options, and other interproperty. If you, your spouse, registered domestic partner dependents had decision making authority regarding ind assets/investments list each asset or investment, the value are income amount texamples if the your self directed lan investment, increasing the stock of other asset in that account. Seattle WA 98101	cluding nterest ership, angible and/or ividual nd any	ned Benefit Pi	lan	D	0			
	ck here 🔟 if continued on attached sheet. List each creditor you or a family r					AMOUNT			
4	or mortgages or real estate reported	REDITORS or more any time during the period. Don't include retail charge accounts, credit ca or mortgages or real estate reported in Item 2.			(USE CODE)				
	Creditor's Name and Address	le	rms of Payment	Secur	rity Given	Original	Present		
٠.									
	eck here ☐ if continued on attached sheet. All filers answer questions A thru D below. If the answer	er is YES to any	of these questions,	 the F-1 Supp	lement must a	lso be com	pleted as		
5	part of this report. If all answers are NO and you are a executive officer filing your initial report, no F-1 Supple			appointee to	o a vacant elec	tive office,	or a state		
	Incumbent elected officials and state executive office Supplement is required of these officeholders unless al				must answer	question E	. An F-1		
A.	At any time during the reporting period were you, your spouse, registere company, union, association, joint venture or other entity or (2) a partnerity including but not limited to a professional limited liability company?	er or member of an	y limited partnership, lim						
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 busines at any time during the reporting period? If yes, complete Supplement, Part A.								
C.									
D.	Did you, your spouse, registered domestic partner or dependents prepa (other than pay for a currently-held public office) at any time during the re				ndards for current	or deferred o	ompensatio		
E.	Only for Persons Filing Annual Report. Regarding the receipt of item your spouse, registered domestic partner or dependents (or any comb source other than your governmental agency provide or pay in whole c seminar or other training? If yes to either or both questions, complete	pination thereof) according to the part for you, you	cept a gift of food or bevour spouse, registered do	erages costing	over \$50 per oc	casion?	or 2) Did an		
ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.					under penalty of perjury that the				
	I hold a state elected office, am an executive state officer or prohave read and am familiar with RCW 42.52.180 regarding thresources in campaigns.								
	I hold a local elected office. I have read and am familiar with regarding the use of public facilities in campaigns.	RCW 42.17A.55	Jenny A. Durkan Signature		05-23-2017 Date		-2017		
			Contact Telephone			*			
			Email: jdurkan@				0-1'		
*CANDIDATES: Do not use public agency addresses or telephone numbers for contact information.			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 of	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	В	A							
heck here ☐ if continued on attached	d sheet.										

Check here

if continued on attached sheet.

COMPANY, ASSOC., GOVERNMENT AGENCY CONTINUED Name DURKAN, JENNY A Page 3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS C. Name and address of each company, association, government Asset Value Income Amount Type of Account or Description of Asset (Use Code) (Use Code) 0 Merrill Lynch 401(k) & Profit Sharing Retirement Plan 1215 4th Avenue Seattle WA 98161 Federal Thrift Savings Plan Retirement Plan: G Fund 0 -Govt Securities Inv P.O. Box 385021 Fund Birmingham AL35238 The Riveter Private Investment 0 1517 12th Avenue Seattle WA 98122 Wells Fargo Investment Advisors IRA Ε 0 777 108th Ave NE Bellevue 98004 WA Bessemer Trust Investment Management - \mathbf{F} B Old Westbury Fund, Inc. 630 Fifth Ave New York NY 10111 Bessemer Trust Cash - Money Market Ε Α Sweep 630 Fifth Ave New York NY 10111 Bessemer Trust Roth IRA - Old Westbury Ε 0 Fund, Inc. 630 Fifth Ave New York NY 10111 Bessemer Trust Jenny Durkan, BENE of L D Α Durkan IRA 630 Fifth Ave New York NY 10111 Charles Schwab Brokerage Account Money Market D Α 508 Union Street Seattle WA 98101 Charles Schwab Brokerage Account Costco Wholesale Co. В Α (COST) 508 Union Street Seattle 98101 WΑ Charles Schwab Brokerage Account Nanometrics Inc. (NANO) 0 В 508 Union Street Seattle WA 98101 Charles Schwab Brokerage Account Energy Select Sector R Α SPDR ETF (XLE) 508 Union Street Seattle WA 98101

COMPANY, ASSOC., GOVERNMENT AGENCY CONTINUED

Name DURKAN, JENNY A Page 3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS C. Name and address of each company, association, government Type of Account or Description of Asset Asset Value Income Amount (Use Code) (Use Code) Charles Schwab Brokerage Account ETFS Gold Trust ETF С 0 (SGOL) 508 Union Street Seattle WA 98101 Check here \square if continued on attached sheet.