

Governor Inslee: F-1 Supplement for 2018

From Stacey Tichenor

Fri, 7 Jan 2022

To: PDC

Good afternoon, Alice Fiman.

As a follow-up to your email on December 21, 2021, here is a response from Governor Inslee and an amended 2018 F-1 supplemental form.

Please let me know if you have any questions.

Thank you,

Stacey

Dear PDC,

Please find attached an F-1 Supplement for 2018. I'm filing this to amend an earlier inadvertent omission.

Moreover, in the spirit of transparency and completeness, I'm also now over-reporting and including several other organizations in which I was associated—organizational affiliations that I may not even be legally required to include on this form, but I include them now to provide the public a fuller understanding of my associations.

And finally, included on my F-1 are several organizations in which the State of Washington is a member, and as Governor, I represent the state in its membership to those organizations. These organizations include:

- Pacific Coast Collaborative
- International alliance to combat ocean acidification (aka Ocean Acidification Alliance)
- West Coast Ocean Alliance
- U.S. Climate Alliance
- We Are Still In

Truly Yours,

Jay Inslee

Governor

** Amended **

PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828		PDC FORM F-1 (11/18)	PERSONAL FINANCIAL AFFAIRS STATEMENT		P M PDC OFFICE USE O A S R T K DATE FILED PDC APR 09 2019															
Refer to instruction manual for detailed assistance and examples. Deadlines: Incumbent elected and appointed officials -- by April 15. Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position.			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">DOLLAR CODE</th> <th style="text-align: left;">AMOUNT</th> </tr> <tr> <td>A</td> <td>\$1 to \$4,499</td> </tr> <tr> <td>B</td> <td>\$4,500 to \$23,999</td> </tr> <tr> <td>C</td> <td>\$24,000 to \$47,999</td> </tr> <tr> <td>D</td> <td>\$48,000 to \$119,999</td> </tr> <tr> <td>E</td> <td>\$120,000 or more</td> </tr> </table>		DOLLAR CODE	AMOUNT	A	\$1 to \$4,499	B	\$4,500 to \$23,999	C	\$24,000 to \$47,999	D	\$48,000 to \$119,999	E	\$120,000 or more				
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E	\$120,000 or more																			
SEND REPORT TO PUBLIC DISCLOSURE COMMISSION			R E C E I V E D																	
Last Name First Middle Initial Inslee Jay R		Names of immediate family members, including registered domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for details. Trudi Inslee, SP																		
Mailing Address (Use PO Box or Work Address) * 501 13 th Avenue SW City County Zip + 4 Olympia Thurston 98501		Office Held or Sought Office title: <u>Governor</u> County, city, district or agency of the office, name and number: <u>Office of the Governor</u> Position number: <u>NA</u> Term begins: <u>1/16/2017</u> ends: <u>16/2021</u>																		
Filing Status (Check only one box.) <input checked="" type="checkbox"/> An elected or state appointed official filing annual report <input type="checkbox"/> Final report as an elected official. Term expired: _____ <input type="checkbox"/> Candidate running in an election: month _____ year _____ <input type="checkbox"/> Newly appointed to an elective office <input type="checkbox"/> Newly appointed to a state appointive office <input type="checkbox"/> Professional staff of the Governor's Office and the Legislature		1 INCOME List each employer, or other source of income (pension, social security, legal judgment, etc.) from which you or a family member, including registered domestic partner, received \$2,400 or more during the period. Include stock options received during the reporting period that had a value of \$2,400 or more. (Report interest and dividends in Item 3.) <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Name and Address of Employer or Source of Compensation</th> <th style="width:20%;">Occupation or How Compensation Was Earned</th> <th style="width:30%;">Amount: (Use Code)</th> </tr> <tr> <td>State of Washington PO BOX 40002 Olympia, WA 98504-0002</td> <td>Governor</td> <td>E</td> </tr> <tr> <td>Office of Personnel Management Retirement Operations PO BOX 45 Boyers, PA 16017-0045</td> <td>Congressman</td> <td>C</td> </tr> </table> Check Here <input type="checkbox"/> if continued on attached sheet			Name and Address of Employer or Source of Compensation	Occupation or How Compensation Was Earned	Amount: (Use Code)	State of Washington PO BOX 40002 Olympia, WA 98504-0002	Governor	E	Office of Personnel Management Retirement Operations PO BOX 45 Boyers, PA 16017-0045	Congressman	C							
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State of Washington PO BOX 40002 Olympia, WA 98504-0002	Governor	E																		
Office of Personnel Management Retirement Operations PO BOX 45 Boyers, PA 16017-0045	Congressman	C																		
2 REAL ESTATE List street address, assessor's parcel number, or legal description AND county for each parcel of Washington real estate with value of over \$12,000 in which you or a family member, including registered domestic partner, held a personal financial interest during the reporting period. (Show partnership, company, etc. real estate on F-1 supplement.)		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:25%;">Property Sold or Interest Divested</th> <th style="width:10%;">Assessed Value (Use Code)</th> <th style="width:25%;">Name and Address of Purchaser</th> <th style="width:40%;">Nature and Amount (Use Code) of Payment or Consideration Received</th> </tr> <tr> <td>Property Purchased or Interest Acquired</td> <td></td> <td>Creditor's Name/Address</td> <td>Payment Terms</td> </tr> <tr> <td></td> <td></td> <td>Security Given</td> <td>Mortgage Amount - (Use Code) Original Current</td> </tr> <tr> <td>All Other Property Entirely or Partially Owned</td> <td></td> <td></td> <td></td> </tr> </table>			Property Sold or Interest Divested	Assessed Value (Use Code)	Name and Address of Purchaser	Nature and Amount (Use Code) of Payment or Consideration Received	Property Purchased or Interest Acquired		Creditor's Name/Address	Payment Terms			Security Given	Mortgage Amount - (Use Code) Original Current	All Other Property Entirely or Partially Owned			
Property Sold or Interest Divested	Assessed Value (Use Code)	Name and Address of Purchaser	Nature and Amount (Use Code) of Payment or Consideration Received																	
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		Security Given	Mortgage Amount - (Use Code) Original Current																	
All Other Property Entirely or Partially Owned																				
1197 Hawley Way NE Bainbridge Island, WA Check here <input type="checkbox"/> if continued on attached sheet		DiTech Financial PO Box 94710 Palatine IL 60094-4710																		

98110

CONTINUE ON NEXT PAGE

3**ASSETS / INVESTMENTS - INTEREST / DIVIDENDS**

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

A. Name and address of each bank or financial institution in which you, a family member, including registered domestic partner, had an account over \$24,000 any time during the report period.	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
9105 PP 101 Congressional Federal Credit Union PO Box 2408 Merrifield, VA 22116-2408	Checking and Savings Account	E	A
WA State Employee Credit Union 330 Union Avenue SE Olympia, WA 98501	Checking and Savings Account	A	A
B. Name and address of each insurance company where you, a family member, including registered domestic partner, had a policy with a cash or loan value over \$24,000 during the period.			
C. Name and address of each company, association, government agency, etc. in which you, a family member, including registered domestic partner, owned or had a financial interest worth over \$2,400. Include stocks, bonds, ownership, retirement plan, IRA, notes, stock options, and other intangible property. If you, your spouse, registered domestic partner and/or dependents had decision making authority regarding individual assets/investments list each asset or investment, the value and any income amount. EXAMPLE: If you self-directed an investment account identify each stock or other asset in that account.			

Check here ☐ if continued on attached sheet.

4**CREDITORS**

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

AMOUNT
(USE CODE)

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

5

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

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

ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.

- ☒ I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns.
- ☐ I hold a local elected office. I have read and am familiar with RCW 42.17A.555 regarding the use of public facilities in campaigns.

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

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

Signature: _____ Date: _____

Contact Telephone: (360) *902-4109

Email: stacey.tichenor@gov.wa.gov (Work)

Email: _____ (Home)*

REPORT NOT ACCEPTABLE WITHOUT FILER'S SIGNATURE

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

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.

Name and Address:

Thrift Savings Plan-Investments Fund-Individual Funds
PO Box 385021
Birmingham, AL 35268

Type of Account or Description	Asset Value	Income Amount
F Fund - Fixed Income Index	E	N/A

Name and Address:

Morgan Stanley Smith Barney
PO Box 608
New York, NY 10013-0502

Type of Account or Description	Asset Value	Income Amount
MS Liquid Asset Fund	B	A
IShares TIP Bond	C	A
Costco Wholesale Corp	B	A
Starbucks	B	A
Zumiez, Inc.	B	0
Dow Jones	C	A
Microsoft	B	0
Expeditors International	B	0
Boeing	C	0
Alaska Air	B	0
Docusign	B	0
T-Mobile	B	0
Expedia	B	0
Amazon	B	0

**PUBLIC DISCLOSURE COMMISSION**

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

PDC FORM

F-1SUPPLEMENT
(1/15)**SUPPLEMENT PAGE**
PERSONAL FINANCIAL AFFAIRS STATEMENT**PROVIDE INFORMATION FOR YOURSELF, SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD**

Last Name Inslee	First Jay	Middle Initial R	DATE January 7, 2022
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A**OFFICE HELD,
BUSINESS
INTERESTS:**

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

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

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

ENTITY NO. 1Reporting For: Self ☒ Spouse ☐Registered Domestic Partner ☐ Dependent ☐LEGAL NAME: **Democratic Governors Association**

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME: **Democratic Governors Association (DGA)****Chair**ADDRESS: **1225 Eye St. NW, Suite 1100, Washington DC 20005****BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:****The Democratic Governors Association is a Washington, D.C.-based 527 organization founded in 1983, consisting of U.S. state and territorial governors affiliated with the Democratic Party.****PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:**

Purpose of payments

Amount (actual dollars)

None**\$****PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:**

Agency name:

Purpose of payment (amount not required)

None**PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE**

Customer name:

Purpose of payment (amount not required)

None**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):****N/A**Check here ☐ if continued on attached sheet**CONTINUE PARTS B AND C ON NEXT PAGE**

Name Jay Inslee	
ENTITY NO. 2	Reporting For: Self <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Registered Domestic Partner <input type="checkbox"/> Dependent <input type="checkbox"/> LEGAL NAME: National Governors Association TRADE OR OPERATING NAME: National Governors Association (NGA) ADDRESS: 444 North Capitol Street, Suite 267, Washington, D.C. 20001 BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION: The National Governors Association is the nonpartisan voice of the leaders of 55 states, territories, and commonwealths. PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE: <div> Purpose of payments Amount (actual dollars) </div> <div> Office of the Governor pays annual NGA dues. \$153,100 </div> PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE: <div> Agency name: Purpose of payment (amount not required) </div> <div> Governor’s Offices from other states for annual dues. </div> PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE <div> Customer name: Purpose of payment (amount not required) </div> <div> N/A </div> 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): <div> N/A </div>
Check here <input type="checkbox"/> if continued on attached sheet	

Name Jay Inslee	
ENTITY NO. 3	Reporting For: Self <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Registered Domestic Partner <input type="checkbox"/> Dependent <input type="checkbox"/> POSITION OR PERCENT OF OWNERSHIP Member
LEGAL NAME: Western Governors Association	
TRADE OR OPERATING NAME: Western Governors Association (WGA)	
ADDRESS: 1600 BROADWAY, SUITE 1700, DENVER, CO 80202, U.S	
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION: The Western Governors' Association is a non-partisan organization of all 22 United States Governors that are considered to be part of the Western region of the nation.	
PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE: Purpose of payments	Amount (actual dollars) Office of the Governor pays annual WGA dues. \$ 36,000
PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE: Agency name:	Purpose of payment (amount not required) Governor's Offices from Western states for annual dues. Annual Dues
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE Customer name:	Purpose of payment (amount not required) NONE
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): N/A	

Name Jay Inslee		
ENTITY NO. 4		Reporting For: Self <input checked="" type="checkbox"/> Spouse <input type="checkbox"/>
		Registered Domestic Partner <input type="checkbox"/> Dependent <input type="checkbox"/>
LEGAL NAME:	Governor’s Coalition on Wind and Solar Energy	POSITION OR PERCENT OF OWNERSHIP
TRADE OR OPERATING NAME:	Governor’s Coalition on Wind and Solar Energy	Member
ADDRESS: 2200 Wilson Blvd, Suite 102-22, Arlington, VA 22201-3324		
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:		
Bipartisan group of the nation’s governors who are dedicated to the development of the nation’s wind and solar energy resources to meet America’s domestic energy demands in an environmentally responsible manner.		
PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:		
Purpose of payments		Amount (actual dollars)
None		\$
PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:		
Agency name:		Purpose of payment (amount not required)
None		
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE		
Customer name:		Purpose of payment (amount not required)
None		
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):		
N/A		

Name Jay Inslee	
ENTITY NO. 5	Reporting For: Self <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Registered Domestic Partner <input type="checkbox"/> Dependent <input type="checkbox"/>
LEGAL NAME: Governors for K-12 Computer Science	POSITION OR PERCENT OF OWNERSHIP Co-Chair
TRADE OR OPERATING NAME: Governors for K-12 Computer Science	
ADDRESS: No street address. https://www.governorsforcs.org/	
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION: The Governors' Partnership for K-12 Computer Science is a group of bi-partisan state leaders committed to advancing policy and funding to expand access to, and increase equity in, K-12 computer science (CS) education.	
PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE: Purpose of payments	Amount (actual dollars)
NONE	\$
PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE: Agency name:	Purpose of payment (amount not required)
NONE	
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE Customer name:	Purpose of payment (amount not required)
NONE	
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):	
N/A	

Name Jay Inslee	
ENTITY NO. 6	Reporting For: Self <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Registered Domestic Partner <input type="checkbox"/> Dependent <input type="checkbox"/> POSITION OR PERCENT OF OWNERSHIP Member
LEGAL NAME: Pacific Coast Collaborative	
TRADE OR OPERATING NAME: Pacific Coast Collaborative	
ADDRESS: No street address. https://pacificcoastcollaborative.org/	
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION: Through the Pacific Coast Collaborative, British Columbia, Washington, Oregon, California, and the cities of Vancouver, Seattle, Portland, San Francisco, Oakland, and Los Angeles are working together to build the low carbon economy of the future.	
PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE: Purpose of payments None Amount (actual dollars) \$	
PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE: Agency name: None Purpose of payment (amount not required)	
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE Customer name: None Purpose of payment (amount not required)	
WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel): N/A	

Name Jay Inslee	
ENTITY NO. 7	Reporting For: Self <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Registered Domestic Partner <input type="checkbox"/> Dependent <input type="checkbox"/>
LEGAL NAME: International alliance to combat ocean acidification	POSITION OR PERCENT OF OWNERSHIP
TRADE OR OPERATING NAME: International alliance to combat ocean acidification (aka Ocean Acidification Alliance) Member	
ADDRESS: No Street Address https://www.oaalliance.org/	
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION: The International Alliance to Combat Ocean Acidification brings together governments and organizations from across the globe dedicated to taking urgent action to protect coastal communities and livelihoods.	
PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:	
Purpose of payments	Amount (actual dollars)
None	\$
PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:	
Agency name:	Purpose of payment (amount not required)
None	
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE	
Customer name:	Purpose of payment (amount not required)
None	
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):	
N/A	

Name Jay Inslee	
ENTITY NO. 8	Reporting For: Self <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Registered Domestic Partner <input type="checkbox"/> Dependent <input type="checkbox"/>
LEGAL NAME: West Coast Ocean Alliance	POSITION OR PERCENT OF OWNERSHIP Member
TRADE OR OPERATING NAME: West Coast Ocean Alliance	
ADDRESS: No Street Address https://westcoastoceanalliance.org/	
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION: A regional partnership focused on enhanced management and coordination for the ocean along the West Coast of the U.S.	
PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE: Purpose of payments	Amount (actual dollars)
None	\$
PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE: Agency name:	Purpose of payment (amount not required)
None	
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE Customer name:	Purpose of payment (amount not required)
None	
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):	
N/A	

Name Jay Inslee	
ENTITY NO. 9	Reporting For: Self <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Registered Domestic Partner <input type="checkbox"/> Dependent <input type="checkbox"/>
LEGAL NAME: U.S. Climate Alliance	POSITION OR PERCENT OF OWNERSHIP Member
TRADE OR OPERATING NAME: U.S. Climate Alliance	
ADDRESS: No Street Address http://www.usclimatealliance.org/	
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION: U.S. Climate Alliance states are committed to taking real, impactful, on-the-ground action that urgently addresses the climate challenge. In becoming an Alliance member, states commit to achieve the Paris Agreement’s goal of keeping temperature increases below 1.5 degrees Celsius.	
PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE: Purpose of payments None Amount (actual dollars) \$	
PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE: Agency name: None Purpose of payment (amount not required)	
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE Customer name: None Purpose of payment (amount not required)	
WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel): N/A	

Information Continued

F-1 Supplement

Name

Jay Inslee

ENTITY NO. 10

Reporting For: Self ☒ Spouse ☐
Registered Domestic Partner ☐ Dependent ☐
LEGAL NAME: We Are Still In
TRADE OR OPERATING NAME: We Are Still In
ADDRESS: No Street Address. <https://www.wearestillin.com/>
POSITION OR PERCENT OF OWNERSHIP
Member
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:
We Are Still In is a joint declaration of support for climate action, signed by more than 3,900 CEOs, mayors, governors, tribal leaders, college presidents, faith leaders, health care executives, and others
PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
Purpose of payments
None
Amount (actual dollars)
\$
PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
Agency name:
None
Purpose of payment (amount not required)
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE
Customer name:
None
Purpose of payment (amount not required)
WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):
N/A

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

C FOOD TRAVEL SEMINARS (continued)				
Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
			\$	