

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**  
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NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Eaken, Amanda			

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)

City and County of San Francisco

Division, Board, Department, District, if applicable

Your Position

Municipal Transportation Agency Board of Directors

Vice-Chair

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**☐ State☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner  
(Statewide Jurisdiction)☐ Multi-County \_\_\_\_\_☒ County of San Francisco☒ City of San Francisco☐ Other \_\_\_\_\_**3. Type of Statement (Check at least one box)**☒ **Annual:** The period covered is January 1, 2021 through December 31, 2021.☐ **Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one circle)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2021.

☐ The period covered is January 1, 2021 through the date of leaving office.☐ **Assuming Office:** Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.☐ **Candidate:** Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_**4. Schedule Summary (must complete) ► Total number of pages including this cover page: 7****Schedules attached**☒ **Schedule A-1 - Investments** – schedule attached☒ **Schedule C - Income, Loans, & Business Positions** – schedule attached☐ **Schedule A-2 - Investments** – schedule attached☐ **Schedule D - Income – Gifts** – schedule attached☐ **Schedule B - Real Property** – schedule attached☐ **Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or-

☐ **None - No reportable interests on any schedule****5. Verification**

MAILING ADDRESS	STREET	CITY	STATE	ZIP CODE
(Business or Agency Address Recommended - Public Document)				
		San Francisco	CA	94103
DAYTIME TELEPHONE NUMBER		E-MAIL ADDRESS		
( )				

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

 Date Signed 03/27/2022  
 (month, day, year)

 Signature Amanda Eaken  
 (File the originally signed paper statement with your filing official.)

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

*Investments must be itemized.**Do not attach brokerage or financial statements.***CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Eaken, Amanda

## ▶ NAME OF BUSINESS ENTITY

McDonalds

GENERAL DESCRIPTION OF THIS BUSINESS

Consumer Cyclical

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**      04 / 14 / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

CVS Health Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Healthcare

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Home Depot Inc

GENERAL DESCRIPTION OF THIS BUSINESS

Consumer Cyclical

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Pepsico

GENERAL DESCRIPTION OF THIS BUSINESS

Consumer Staples

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Alphabet Inc, Class C

GENERAL DESCRIPTION OF THIS BUSINESS

Technology

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Alphabet Inc, Class A

GENERAL DESCRIPTION OF THIS BUSINESS

Technology

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

Comments: \_\_\_\_\_

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

*Investments must be itemized.**Do not attach brokerage or financial statements.***CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Eaken, Amanda

## ▶ NAME OF BUSINESS ENTITY

Amgen Inc

GENERAL DESCRIPTION OF THIS BUSINESS

Healthcare

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

LiAM Research Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Technology

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Yum China Holdings, Inc

GENERAL DESCRIPTION OF THIS BUSINESS

Consumer Cyclical

FAIR MARKET VALUE

☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

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 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Medtronic Plc

GENERAL DESCRIPTION OF THIS BUSINESS

Healthcare

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

United Healthgroup Inc

GENERAL DESCRIPTION OF THIS BUSINESS

Healthcare

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Dollar Tree

GENERAL DESCRIPTION OF THIS BUSINESS

Consumer Staples

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**      04 / 14 / **21**  
 ACQUIRED      DISPOSED

Comments: \_\_\_\_\_

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

*Investments must be itemized.**Do not attach brokerage or financial statements.***CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Eaken, Amanda

## ▶ NAME OF BUSINESS ENTITY

VF Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Consumer Cyclical

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

      /      /21            /      /21  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Thermo Fisher Scientific Inc

GENERAL DESCRIPTION OF THIS BUSINESS

Healthcare

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

      /      /21            /      /21  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Apple

GENERAL DESCRIPTION OF THIS BUSINESS

Technology

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

      /      /21            /      /21  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Accenture Plc Ireland Cl A

GENERAL DESCRIPTION OF THIS BUSINESS

Technology

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

      /      /21            /      /21  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Illumina Inc

GENERAL DESCRIPTION OF THIS BUSINESS

Biotechnology

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

      /      /21            /      /21  
ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Colgate Palmolive

GENERAL DESCRIPTION OF THIS BUSINESS

Consumer Staples

FAIR MARKET VALUE

☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

      /      /21            /      /21  
ACQUIRED      DISPOSED

Comments: \_\_\_\_\_

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

*Investments must be itemized.**Do not attach brokerage or financial statements.***CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Eaken, Amanda

## ▶ NAME OF BUSINESS ENTITY

Intel Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Technology

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Walt Disney Co (Holding Co) Disney Com

GENERAL DESCRIPTION OF THIS BUSINESS

Consumer Cyclical

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Microsoft Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Technology

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Nike Inc Cl B

GENERAL DESCRIPTION OF THIS BUSINESS

Consumer Cyclical

FAIR MARKET VALUE

☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Applied Materials

GENERAL DESCRIPTION OF THIS BUSINESS

Technology

FAIR MARKET VALUE

☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

## ▶ NAME OF BUSINESS ENTITY

Costco Wholesale Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Consumer Staples

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

       /        / **21**             /        / **21**  
 ACQUIRED      DISPOSED

Comments: \_\_\_\_\_



# SCHEDULE C

## Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**
**FAIR POLITICAL PRACTICES COMMISSION**
**Name**
Eaken, Amanda
**▶ 1. INCOME RECEIVED**
**NAME OF SOURCE OF INCOME**
EHDD
**ADDRESS (Business Address Acceptable)**
San Francisco, CA 94111
**BUSINESS ACTIVITY, IF ANY, OF SOURCE**
Architectural Services
**YOUR BUSINESS POSITION**
**GROSS INCOME RECEIVED** ☐ No Income - Business Position Only

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☒ OVER \$100,000

**CONSIDERATION FOR WHICH INCOME WAS RECEIVED**
☐ Salary ☒ Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Loan repayment

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

 \_\_\_\_\_  
(Describe)

☐ Other \_\_\_\_\_  
(Describe)

**▶ 1. INCOME RECEIVED**
**NAME OF SOURCE OF INCOME**
NRDC
**ADDRESS (Business Address Acceptable)**
New York, NY 10011
**BUSINESS ACTIVITY, IF ANY, OF SOURCE**
Environmental Advocacy Organization
**YOUR BUSINESS POSITION**
Interim Co-Director, US Cities Climate Challenge
**GROSS INCOME RECEIVED** ☐ No Income - Business Position Only

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☒ OVER \$100,000

**CONSIDERATION FOR WHICH INCOME WAS RECEIVED**
☒ Salary ☐ Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

☐ Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Loan repayment

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

 \_\_\_\_\_  
(Describe)

☐ Other \_\_\_\_\_  
(Describe)

**▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

**NAME OF LENDER\***
**ADDRESS (Business Address Acceptable)**
**BUSINESS ACTIVITY, IF ANY, OF LENDER**
**HIGHEST BALANCE DURING REPORTING PERIOD**
☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ OVER \$100,000

**INTEREST RATE**

 \_\_\_\_\_% ☐ None

**TERM (Months/Years)**
**SECURITY FOR LOAN**
☐ None

☐ Personal residence

☐ Real Property \_\_\_\_\_  
Street address

 \_\_\_\_\_  
City

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

**Comments:** \_\_\_\_\_