

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION 1225 L St., Suite 400 P.O. Box 95086 Lincoln, NE 68509 (402) 471-2522 www.nadc.nebraska.gov	STATEMENT OF FINANCIAL INTERESTS NADC FORM C-1	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">POSTMARK DATE</td> <td style="width: 50%; text-align: center; padding: 2px;">4-21-21</td> </tr> <tr> <td style="padding: 2px;">MICROFILM NUMBER</td> <td style="padding: 2px;"></td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 2px;">OFFICE USE ONLY</td> </tr> <tr> <td colspan="2" style="height: 100px;"></td> </tr> </table>	POSTMARK DATE	4-21-21	MICROFILM NUMBER		OFFICE USE ONLY			
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OFFICE USE ONLY										
BEFORE COMPLETING READ FILING REQUIREMENTS										

- Candidates for designated offices and holders of designated offices and positions must file this statement with the Commission. See Sections 1A and 1B of the instructions.
- Candidates (including incumbents) subject to this filing requirement must file this statement in order to have their names appear on the ballot. (See Instructions).
- Designated officeholders and holders of designated positions must file this statement with the Commission annually.
- Dollar values need not be report for any item, except Item 11.
- Persons who fail to file as required are subject to a civil penalty of up to \$2,000.

ITEM 1	YOUR NAME, ADDRESS AND PHONE NUMBER
Name	Morgan PJ Telephone No. 402-871-7775 LAST FIRST MIDDLE
Address	11124 Pierce Plaza Omaha NE 68144 STREET ADDRESS OR RURAL ROUTE CITY STATE ZIP CODE

ITEM 2	OCCASION FOR FILING (Check Appropriate Box)
☒ A candidate for elective office ☒ Annual officeholder's or state employee's report ☐ Left office or position ☐ Newly appointed to office or position	

ITEM 3	OFFICE HELD & TERM OF OFFICE (Incumbent elected/appointed officials and state employees. See 1B of instructions)
List the office or position you currently hold which requires this filing. If you have left office, list the office you held. Office or Position: <u>Douglas County Commissioner District</u> Term: <u>1-11-19</u> <u>1-11-23</u> BEGINS ENDS	
Name of City, County, District, or State Agency: <u>Douglas County</u>	

ITEM 4	OFFICE SOUGHT (Candidates only. See 1A of instructions)
List the office sought which requires this filing. Office: <u>Douglas County Commissioner District 4</u>	
Name of City, County, District, or State Office: <u>Douglas County</u>	

ITEM 5	PERIOD COVERED BY THIS STATEMENT
This statement must cover all financial interests for the entire " preceding calendar year " and not just as of year-end. If you have left office, this statement must cover all financial interests from the end of the calendar year for which you previously filed up to and including the date you left office.	
☒ This statement covers the preceding calendar year January 1 through December 31, <u>2020</u>	
☐ Left office, this statement covers the period January 1, _____ to _____ (DATE YOU LEFT OFFICE OR POSITION)	

ITEM 6 SOURCES OF INCOME OF OVER \$1,000

Income includes money or any other form of recompense constituting income under the Internal Revenue Code. (See definitions)

Name and address of any source* (including an individual, business, body of government, political subdivision or body corporate) from which income of over \$1,000 was received.

List the nature of the source's business and the nature of the services you rendered or the circumstances under which income was received. NOTE: Do not list the amount of the income.

List your Government position if you were paid more than \$1,000.

1.) PJ Morgan Investments

1a.) Commissions

7801 Wakeley Plaza

Omaha, NE 68114

2.) Douglas County

2a.) Douglas County Commissioner District 4

1819 Farnam Street

Omaha, NE 68183

3.) City Of Omaha

3a.) Pension

Omaha Douglas Civic Center

1819 Farnam St #1008 Omaha, NE 68183

4.) Social Security

4a.) Pension

*NOTE: IF INCOME RESULTED FROM EMPLOYMENT BY, OPERATION OF OR PARTICIPATION IN A PROPRIETORSHIP, PARTNERSHIP, CORPORATION OR OTHER PERSON, LIST THE SAME AS THE SOURCE OF INCOME, BUT NOT THE PATRONS, CUSTOMERS, PATIENTS, OR CLIENTS THEREOF.

ITEM 7 BUSINESSES WITH WHICH YOU ARE ASSOCIATED Including Non Profits (See definitions)Name and address of all businesses, organizations, or associations (profit and non-profit) with which you held a position of officer, director, limited liability company member, partner, or stockholder and any entity in which you held a position of trustee. Such reporting is required based on the position held, not on whether income was received. You need **not** report business associations which are otherwise listed under Item 6.

Name and Address of Business or Organization.

Nature of Association

If you have nothing to report, write NONE

1.) Underwood LTD Partners

1a.) Partner

7801 Wakeley Plaza

Omaha, NE 68114

2.) 3031 N 120th Street LLC

2a.) Partner

7801 Wakeley Plaza

Omaha, NE 68114

3.) Dundee Three LLC

3a.) Partner

7801 Wakeley Plaza

Omaha, NE 68114

4.) AMM Investments LLC

4a.) Partner

7801 Wakeley Plaza

Omaha, NE 68114

5.) 4524 Farnam LLC

5a.) Partner

7801 Wakeley Plaza

Omaha, NE 68114

6.) 122 AVE LLC

6a.) Partner

7801 Wakeley Plaza

Omaha, NE 68114

7.) Vision 13LB LLC

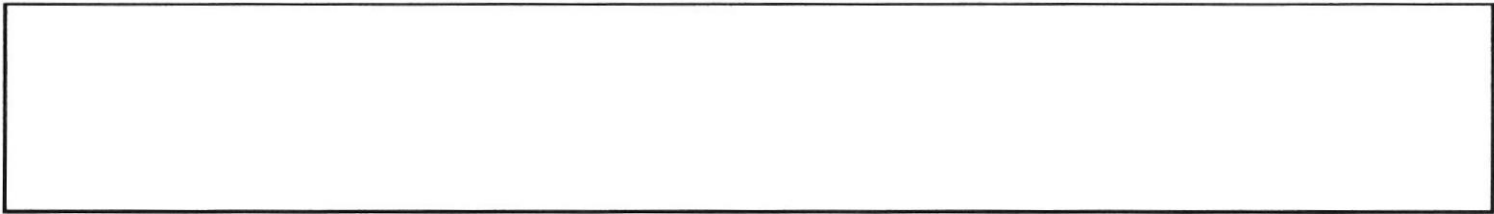
7a.) Partner

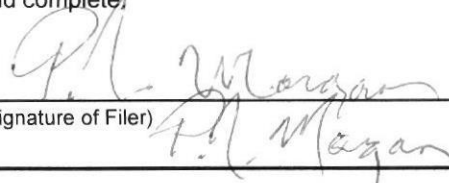
7801 Wakeley Plaza

Omaha, NE 68114

Name and Address of Business Or Organization			Nature of Association		
8)	AFA1 LLC	8a)	Partner		
	7801 Wakeley Plaza				
	Omaha, NE 68114				
9)	4924 Four LLC	9a)	Partner		
	7801 Wakeley Plaza				
	Omaha, NE 68114				
10)	80th Street LLC	10a)	Partner		
	7801 Wakeley Plaza				
	Omaha, NE 68114				
11)	BCPRBD LLC	11a)	Partner		
	7801 Wakeley Plaza				
	Omaha, NE 68114				
12)	Bohemian Village LLC	12a)	Partner		
	7801 Wakeley Plaza				
	Omaha, NE 68114				
13)	TKNEAS LLC	13A)	Partner		
	7801 Wakeley Plaza				
	Omaha, NE 68114				
14)	Leavenworth6 LLC	14a)	Partner		
	7801 Wakeley Plaza				
	Omaha, NE 68114				

ITEM 8	REAL PROPERTY OF THE FILER IN NEBRASKA (Real property valued at less than \$1,000 and your personal residence need <i>not</i> be reported.)	
List all real property in Nebraska in your name or in which you have a direct ownership interest. The description required must be sufficient to identify the location of the property. Exceptions: You need not report real property owned by a business listed in Item 6 or 7, your personal residence or real property valued at less than \$1,000. Personal residence refers to your principal dwelling-house and adjacent land used for house-hold purposes, such as lawns and gardens.		
Location of Property (Description or Address)		Nature of Property (such as: agricultural, commercial, industrial, residential-rental)
If you have nothing to report, write NONE		
2334 Ridgewood - Omaha, NE 534 South 87 th Circle - Omaha, NE 5639 Briggs - Omaha, NE 5838 Woolworth - Omaha, NE 5842 Woolwirth - Omaha, NE 6478 Pierce - Omaha, NE 8031 Chicago - Omaha, NE 8060 Chicago - Omaha, NE Tower Park Office Building - Omaha, NE 6336 Pierce		
ITEM 9	OTHER FINANCIAL INTERESTS AND PROPERTY HELD DURING THE PERIOD OF THIS STATEMENT WHICH EXCEEDED A FAIR MARKET VALUE OF \$1,000 AT ANY TIME DURING THE REPORTING PERIOD	
(a) List the names and addresses of the institutions in which you had checking and savings accounts and certificates of deposit.		
Financial Institution		Address
If you have nothing to report, write NONE		
US Bank		222 South 72 nd Street, Omaha, NE
Core Bank		12100 West Center Road, Omaha, NE
First Savings Bank		3450 South 84 th Street, Omaha, NE
(b) List the names of the issuers of all stocks, bonds, and government securities, not otherwise listed under Items 6 or 7.		
If you have nothing to report, write NONE		
Regular Stock: AF US Government Money Market A, New World Fund A, Capital Income Builder A, Int'l Growth & Income A, Small Cap World Fund A, Dev World Growth & Income A, Capital World Growth & Income Fund A		
(c) Describe other property owned or held for the production of income not otherwise disclosed in Items 6, 7, 8 or 9(a)(b). Include leaseholds and other interests in real estate, promissory notes and other obligations owed to you, beneficial interests in trusts and estates, cash value life insurance, IRAs, deferred income and retirement plans. Exception: Do not include accounts receivable, inventory, fixtures and equipment owned or used by a business listed in Items 6 & 7 or household goods, personal automobiles and other tangible personal property unless such property was held primarily for sale or exchange.		
If you have nothing to report, write NONE		



ITEM 10	CREDITORS TO WHOM \$1,000 OR MORE WAS OWED OR GUARANTEED BY YOU OR A MEMBER OF YOUR IMMEDIATE FAMILY.		
Exception: Loans from a relative and land contracts which have been recorded with the County Clerk or Register of Deeds need not be reported. Accounts payable, debts arising out of retail installment transactions or loans made by a financial institution in the ordinary course of business need not be reported.			
Name		Address	
If you have nothing to report, write NONE			
US Bank Home Mortgage		P. O. Box 790415 St Louis, Mo 63179-0415	
ITEM 11	SOURCES OF GIFTS OF A VALUE OF MORE THAN \$100 RECEIVED EXCEPT GIFTS FROM RELATIVES. (See definitions) If you have nothing to report, write NONE		
Name and address of Donor	Occupation or nature of business of Donor	Value of Gift (See Key Below)	Description of Gift and Circumstances or Occasion for Gift
If you have nothing to report, write NONE			
		Choose Value:	
		Choose Value:	
		Choose Value:	
		Choose Value:	
		Choose Value:	
		Choose Value:	
		Choose Value:	
		Choose Value:	
		Choose Value:	
The monetary value of each gift shall be categorized based on the good faith estimate of the filer. For each reported gift insert in the Value column the letter which corresponds to the value category of the gift. The value categories are: A) \$100.01 to \$200; B) \$200.01 to \$500; C) \$500.01 to \$1,000; D) \$1,000.01 or more.			
ITEM 12	SIGNATURE OF FILER AND DATE.		
I hereby state that I have used all reasonable diligence in the preparation of this Statement and that to the best of my knowledge it is true and complete.			
 (Signature of Filer)		4/21/21 (Date)	

Criminal Penalties: Any person who files a statement knowing that information is false shall be guilty of a Class IV Felony, See §49-14,134, Nebraska Revised Statutes.