

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;"></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; vertical-align: bottom; padding: 5px;"> 2021 FEB -2 AM 8:33 </td> </tr> </table>	POSTMARK DATE		MICROFILM NUMBER		OFFICE USE ONLY		2021 FEB -2 AM 8:33	
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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	Texel	Timothy	J.	Telephone No.	402-420-6996
	LAST	FIRST	MIDDLE		
Address	7640 S. 38 th Street			Lincoln	NE 68516
	STREET ADDRESS OR RURAL ROUTE			CITY	STATE ZIP CODE

ITEM 2 OCCASION FOR FILING (Check Appropriate Box)

- | | |
|--|--|
| ☐ A candidate for elective office | ☐ Left office or position |
| ☒ Annual officeholder's or state employee's report | ☐ 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: Executive Director & General Counsel Term: Not Applicable

BEGINS ENDS

Name of City, County, District, or State Agency: Nebraska Power Review Board

ITEM 4 OFFICE SOUGHT (Candidates only. See 1A of instructions)

List the office sought which requires this filing.

Office: _____

Name of City, County, District, or State Office: _____

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, 2020
- ☐ 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.) | Nebraska Power Review Board
301 Centennial Mall South - Lower Level
Lincoln, NE 68509 | 1a.) | Salary for services as State agency's executive director & general counsel. |
| 2.) | Bryan Health
1600 S. 48 th Street
Lincoln, NE 68506-1299 | 2a.) | Wife's salary for services as a registered nurse. |
| 3.) | | 3a.) | |
| 4.) | | 4a.) | |

*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.) | Pine Lake Heights Homeowners Association, Inc.
P.O. Box 22642
Lincoln, NE 68542-2642 | 1a.) | Director |
| 2.) | Western Interconnection Regional Advisory Body
1600 Broadway - Suite 1700
Denver, CO 80202 | 2a.) | Director |
| 3.) | Scouts BSA Troops 25B and 25G (chartered by St. Mark's United Methodist Church)
8550 Pioneers Boulevard
Lincoln, NE 68520 | 3a.) | Committee Chair |
| 4.) | Scouts BSA Crew 25 (chartered by St. Mark's United Methodist Church)
8550 Pioneers Boulevard
Lincoln, NE 68520 | 4a.) | Advisor |
| 5.) | | 5a.) | |
| 6.) | | 6a.) | |
| 7.) | | 7a.) | |

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		
NONE		
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		
Great Western Bank Nebraska State Employees Credit Union USAA Federal Savings Bank Auto Club Trust, FSB		1235 'N' Street, Lincoln, NE 68508 330 S. 16 th Street, Lincoln, NE 68508 10750 McDermott Freeway, San Antonio, TX 78288-0544 P.O. Box 2379, Omaha, NE 68103-9930
(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		
U.S. Treasury Bonds, Series EE and I. See attached list of stock holdings.		
(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		
American Funds Service Company, P.O. Box 6007, Indianapolis, IN 46206-6007 -- Mutual Funds Nebraska Public Employees Retirement System, 1526 'K' Street, Suite 400, Lincoln, NE 68509-4816 Bryan Health Retirement Plan, 1600 S. 48 th Street, Lincoln, NE 68508-1299 -- Wife's Retirement Plan USAA Investment Mutual Funds, P.O. Box 182903, Columbus, OH 43218-2903 -- Mutual Funds TruePath Wealth Advisors of Raymond James, 8700 Executive Woods Drive - Suite 300, Lincoln, NE 68512-9672 -- Mutual Funds and Annuities		

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			
NONE			

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			
NONE		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.			
		2/2/21	
(Signature of Filer)		(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.

Item 9(b)

2020 Holdings

AAPL	Apple	1 Apple Park Way Cupertino, CA 95014
AMGN	Amgen Inc.	1 Amgen Center Drive Thousand Oaks, CA 91320
APD	Air Products & Chemicals	7201 Hamilton Blvd Allentown, PA 18195
BBY	Best Buy Co., Inc.	7601 Penn Ave. South Richfield, MN, 55423
CB	Chubb Limited	Baerengasse 32 Zuerich, 8001, Switzerland
CCL	Carnival	3655 NW 87 th Ave Miami, FL 33178
CMCSA	Comcast	1 Comcast Ctr Philadelphia, PA 19103
CME	CME Group	20 S Wacker Dr Chicago, IL 60606
CSCO	Cisco Systems	170 W Tasman Dr San Jose, CA 95134
CVX	Chevron	6001 Bollinger Canyon Rd San Ramon, CA 94583
ETN	Eaton	Eaton Hse 30 Pembroke Rd Dublin, Ireland
HD	Home Depot	2455 Paces Ferry Rd SE Atlanta, GA 30339
JPM	JP Morgan Chase	383 Madison Ave New York, NY 10179
MDT	Medtronic	20 On Hatch Hatch St Lower Dublin, 2, Ireland
MPC	Marathon Petroleum	539 S Main St Findlay, OH 45840
MRK	Merck & Co	2000 Galloping Hill Rd Kenilworth, NJ 07033
MSFT	Microsoft	1 Microsoft Way Redmond, WA 98052
MSI	Motorola Solutions	500 W Monroe St Chicago, IL 60661
PFE	Pfizer	235 E 42 nd St New York, NY 10017
UNP	Union Pacific	1400 Douglas St Stop 310 Omaha, NE 68179
VZ	Verizon	1095 Avenue of the Americas New York, NY 10036
WMT	Walmart	702 SW 8 th St Bentonville, AK 72716

Updated 01/19/2021