

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%;"></td> </tr> <tr> <td style="padding: 2px;">MICROFILM NUMBER</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;">OFFICE USE ONLY</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 10px;"> RECEIVED JAN 24 2022 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION </td> </tr> </table>	POSTMARK DATE		MICROFILM NUMBER		OFFICE USE ONLY		RECEIVED JAN 24 2022 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION	
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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	Stinner	John	P	Telephone No.	308-631-3182
	LAST	FIRST	MIDDLE		
Address	2310 17 th Street			Gering	NE 69341
	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 IB 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: Legislature Term: 2019-2022

BEGINS ENDS

Name of City, County, District, or State Agency: District 48

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, 2021

☐ 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.) Western States Bank
3430 East Grand Avenue
Laramie WY 82070 | 1a.) Director's Fees, Interest on Saving, Certificate of Deposit
Checking Accounts, Covenant not complete |
| 2.) Western States Bank
3430 East Grand Avenue
Laramie WY 82070 | 2a.) Dividends, Director Fees |
| 3.) Farm Income/Hunting Rights Income
Pasture, Bayard, Nebraska | 3a.) Farm Income/Hunting rights Income
(sold During 2021) |
| 4.) 1031 Exchange Assets
Inland Real Estate Investments | 4a.) Rents |

*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

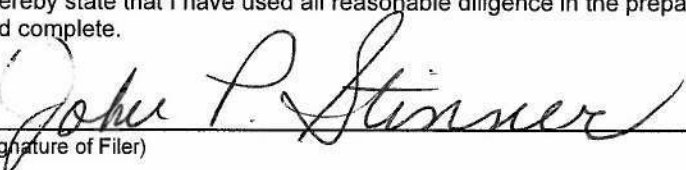
- | | |
|--|--|
| 1.) Rita's Rentals LLC
2310 17 th street
Gering NE 69341 | 1a.) Wife (Rita Only)
Authorized Signer |
| 2.) Western States Bank
3430 East Grand Avenue
Laramie WY 82070 | 2a.) Board of Directors |
| 3.) Western States Bank
3430 East Grand Avenue
Laramie WY 82070 | 3a.) Stockholder |
| 4.) Oregon Trail Community Foundation
115 West Railway Street
Scottsbluff NE 69361 | 4a.) Emeritus |
| 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		
2310 17 th Street Gering, Nebraska Bayard, Nebraska 1135 H Street, Lincoln, Nebraska Condo Unit, Lexington Country Club Fort Myers Florida		Residence 450 Acre Pasture Co-op Share Residential
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		
Western States Bank Platte Valley Bank (Campaign Account)		3430 East Grand Avenue, Laramie WY 82070 scottsbluff, Nebraska
(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		

Self Directed IRA - SAGEPOINT
 401 (K) - AssetMark Inc.
 Various Stocks and Mutual Funds - SAGEPOINT
 REIT - AEI
 Note Receivable - Cecilia Stinner
 APPL - Apple Inc
 EMR - Emerson
 HON - Honeywell
 NUE - Nucor
 V- Visa
 DOW - DOW Chemical
 TGT - Target
 XOM - Exxon
 CNQ - Canadian Natural Resources
 CPX - Chevron
 MS - Morgan Stanley
 PRU - Presidential
 BRMK- Broad Mark Realty
 MO - Altria Group Inc.
 NEM - Newmont Corporation
 ONL - Orion Office
 ABBV - ABBNIE inc.
 T - ATT Inc.
 BX - Blackstone Group
 BXMT - Blackstone Mortgage Trust
 EPD - Enterprise Prod. Ltd. Ptrns.
 IP - Int'l Paper
 JPM - JP Morgan
 ORI - Oold Republic
 O - Realty Income - REIT
 WM - Waste Management
 Magellan Midstream
 Unum Group
 TRTN - Triton Int'l
 IRA Account Rita
 IRA Account John
 Use Sagepointto invest 401 K funds
 AEI Real Estate Trust
 W.P. Carry Inc
 Verizon Inc.

(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			
Sold my Daughter's (Cecilia E. Stinner) Residence on contract ** This property was owned by Rita's Rentals LLC which my wife is the only member and Rita's Rentals LLC holds the contract and collects payments - CD Loan at Western States Bank to support balance owed. Western States Bank 1) Pledged CD for loan for my daughter		1350 7 th street, Gering, NEbraska 3430 East Grand Avenue Laramie, WY 82070	
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:	
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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)		1/27/22 (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.

NADC FORM C-1 Statement of Financial Interest Attachment

Item 6

ABBV - ABBNIE inc.

T - ATT Inc.

BX - Blackstone Group

BXMT - Blackstone Mortgage Trust

EPD - Enterprise Prod. Ltd. Ptrns.

IP - Int'l Paper

JPM - JP Morgan

ORI - Oold Republic

O - Realty Income - REIT

WM - Waste Management

Magellan Midstream

Unum Group

TRTN - Triton Int'l

IRA Account Rita

IRA Account John

Use Sagepointto invest 401 K funds

AEI Real Estate Trust

W.P. Carry Inc

Verizon Inc.

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REIT - AEI

Note Receivable - Cecilia Stinner

APPL - Apple Inc

EMR - Emerson

HON - Honeywell

NUE - Nucor

V- Visa

DOW - DOW Chemical

TGT - Target

XOM - Exxon

CNQ - Canadian Natural Resources

CPX - Chevron

MS - Morgan Stanley

PRU - Presidential

BRMK- Broad Mark Realty

MO - Altria Group Inc.

NEM - Newmont Corporation

ONL - Orion Office

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Office or Position: <u>Legislature</u>	Term: <u>2019-2022</u>	BEGINS	ENDS
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Name of City, County, District, or State Agency: District 48

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| 4.) 1031 Exchange Assets
Inland Real Estate Investments | 4a.) Rents |
| 5.) State Legislature | \$1200 Salary and Expenses |

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Nature of Association

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- | | |
|--|--|
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 TGT - Target
 XOM - Exxon
 CNQ - Canadian Natural Resources
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See above listing

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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			
I do buy season Tickets for Nebraska Football and try and reimburse them for Special Events and invites.	If you have received anything to the contrary I would like to know so my report can be accurate	Choose Value:	None that I know of
None		Choose Value:	
None		Choose Value:	
None		Choose Value:	
None		Choose Value:	
None		Choose Value:	
None		Choose Value:	
None		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)		(Date)	