

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;">2-28-22</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: 5px;">OFFICE USE ONLY</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 10px;"> MAR 02 2022 NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION </td> </tr> </table>	POSTMARK DATE	2-28-22	MICROFILM NUMBER		OFFICE USE ONLY		MAR 02 2022 NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION																	
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MAR 02 2022 NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION																										
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																										
<table style="width: 100%;"> <tr> <td style="width: 15%;">Name</td> <td style="width: 35%;"><u>Hoiberg</u></td> <td style="width: 15%;"><u>Fredrick</u></td> <td style="width: 15%;"><u>K</u></td> <td style="width: 20%;">Telephone No.</td> <td style="width: 20%;"><u>402-472-2265</u></td> </tr> <tr> <td></td> <td>LAST</td> <td>FIRST</td> <td>MIDDLE</td> <td></td> <td></td> </tr> <tr> <td>Address</td> <td colspan="3"><u>236 Hendricks Training Complex</u></td> <td><u>Lincoln</u></td> <td><u>NE 68588</u></td> </tr> <tr> <td></td> <td colspan="3">STREET ADDRESS OR RURAL ROUTE</td> <td>CITY</td> <td>STATE ZIP CODE</td> </tr> </table>			Name	<u>Hoiberg</u>	<u>Fredrick</u>	<u>K</u>	Telephone No.	<u>402-472-2265</u>		LAST	FIRST	MIDDLE			Address	<u>236 Hendricks Training Complex</u>			<u>Lincoln</u>	<u>NE 68588</u>		STREET ADDRESS OR RURAL ROUTE			CITY	STATE ZIP CODE
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ITEM 2 OCCASION FOR FILING (Check Appropriate Box)																										
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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>Head Men's Basketball Coach</u> Term: <u>March 2019-Present</u> BEGINS ENDS Name of City, County, District, or State Agency: <u>University of Nebraska-Lincoln</u>																										
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, <u>2021</u>																										
☐ Left office, this statement covers the period January 1, _____ to _____ (DATE YOU LEFT OFFICE OR POSITION)																										

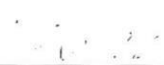
ITEM 6 SOURCES OF INCOME OF OVER \$1,000	
Income includes money or any other form of recompense constituting income under the Internal Revenue Code. (See definitions)	
Name and address of any source* (including an individual, business, body of government, political subdivision or body corporate) from 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.) University of Nebraska-Lincoln 1400 R Street Lincoln, NE 68588	1a.) Head Men's Basketball Coach
2.) See Attachment	2a.)
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.) Chicago Bulls	1a.) Former Head Basketball Coach
2.) Self-Employment	2a.) Coaching Basketball Camps
3.)	3a.)
4.)	4a.)
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		
US Bank		425 Walnut Street, Cincinnati, OH 45202
(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		
See attached		
(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		
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			
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.	
	02/28/22 10:50 CST
(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.

2021 NADC Form C-1

Fred Hoiberg, Head Coach
Nebraska Basketball

Attachment

Item 9(b) List the names of the issuers of all stocks, bonds, and government securities, not otherwise listed under Items 6 or 7.

CITIGROUP INC. 0%22 DUE 07/29/22
CITIGROUP INC. 0%22 DUE 10/05/22
CITIGROUP INC. 0%23 DUE 12/15/23
CITIGROUP INC. VAR 24 DUE 01/19/24
GS FIN CORP MEDIUM 0%23 DUE 10/16/23
MORGAN STANLEY FIN 0%22 DUE 08/31/22
AMERICAN FUNDS INTERNATIONAL VNTG F-3
INVESCO GLOBAL REAL ESTATE INCOME Y
COLUMBIA LIMITED DURATION CREDIT INST2
GOLDMAN SACHS INTL SM CP INSGHTS INSTL
HARTFORD FLOATING RATE I
ISHARES RUSSELL 1000 GROWTH ETF IV
ISHARES RUSSELL MID CAP GRW ETF IV
ALPS/CORCMDTY MGMT CMPLTCMDTY STRAT I
ISHARES MSCI EAFE INTL IDX INSTL
SPDR S&P 400 MID CAP GROWTH ETF
SPDR S&P 400 MID CAP VALUE ETF
THE MERGER FUND I
MATTHEWS EM SM COMS INSTL
DUCKHORN PORTFOLIO INC
INVESCO DEVELOPING MARKETS R6
JPMORGAN MORTGAGE-BACKED SECURITIES I
PGIM SHORT-TERM CORPORATE BOND Z
T. ROWE PRICE INSTL FLOATING RATE
SPDR S&P 600 SMALL CAP GROWTH ETF
SPDR S&P 600 SMALL CAP VALUE ETF
SPDR S&P 500 ETF
SPDR S&P 500 GROWTH ETF
SPDR S&P 500 VALUE ETF
VERSUS CAPITAL MULTI-MGR REAL EST INC I

Attachment that Accompanies the NADC C-1 Filing

Item 6. Sources of Income of Over \$1,000

The University of Nebraska Foundation provides significant financial support to the University. For federal income tax purposes, the IRS requires resulting reportable income to the undersigned, if any, to be reported as taxable income from the University to the undersigned. This NADC form instructs filers to use the federal income tax definition of income, and for this reason the Foundation is not listed as a separate source of income. This statement supplements the information required on this form in the interest of full disclosure.

Certificate Of Completion

Envelope Id: D588A2F798744A48B8D65FDE18ABEE18
 Subject: Please DocuSign: NADC Form C-1 - Hoiberg 2021.pdf
 Source Envelope:
 Document Pages: 7
 Certificate Pages: 2
 AutoNav: Enabled
 EnvelopeId Stamping: Disabled
 Time Zone: (UTC-06:00) Central Time (US & Canada)

Status: Completed

Envelope Originator:
 Sheryl Burbach
 1400 R St.
 Lincoln, NE 68588
 SBURBACH@HUSKERS.COM
 IP Address: 129.93.161.222

Record Tracking

Status: Original
 2/28/2022 10:44:54 AM
 Holder: Sheryl Burbach
 SBURBACH@HUSKERS.COM

Location: DocuSign

Signer Events

Fred Hoiberg
 fhoiberg@huskers.com
 University of Nebraska
 Security Level: Email, Account Authentication
 (Optional)

Signature



Signature Adoption: Drawn on Device
 Using IP Address: 174.203.128.231
 Signed using mobile

Timestamp

Sent: 2/28/2022 10:47:00 AM
 Viewed: 2/28/2022 10:50:45 AM
 Signed: 2/28/2022 10:50:56 AM

Electronic Record and Signature Disclosure:
 Not Offered via DocuSign

In Person Signer Events

Signature

Timestamp

Editor Delivery Events

Status

Timestamp

Agent Delivery Events

Status

Timestamp

Intermediary Delivery Events

Status

Timestamp

Certified Delivery Events

Status

Timestamp

Carbon Copy Events

Status

Timestamp

Brian Kruse
 brian@northrockpartners.com
 Security Level: Email, Account Authentication
 (Optional)

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Sent: 2/28/2022 10:50:57 AM

Electronic Record and Signature Disclosure:
 Not Offered via DocuSign

Brittany Johnson
 brittany.johnson@northrockpartners.com
 Security Level: Email, Account Authentication
 (Optional)

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Sent: 2/28/2022 10:50:57 AM
 Viewed: 2/28/2022 10:52:14 AM

Electronic Record and Signature Disclosure:
 Not Offered via DocuSign

Witness Events

Signature

Timestamp

Notary Events

Signature

Timestamp

Envelope Summary Events

Status

Timestamps

Envelope Summary Events

Envelope Sent
Certified Delivered
Signing Complete
Completed

Payment Events

Status

Hashed/Encrypted
Security Checked
Security Checked
Security Checked

Status

Timestamps

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2/28/2022 10:50:57 AM

Timestamps