

3-8-23
Ernst

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION 1001 L St., Suite 400 P.O. Box 9389 Lincoln, NE 68509 (402) 471-2500 www.nadcc-nebraska.gov	STATEMENT OF FINANCIAL INTERESTS NAOC FORM C-1	POSTED DATE
		WORKING NUMBER
BEFORE COMPLETING FILING REQUIREMENTS		OFFICE USED

• Candidates for designated offices and holders of designated offices and positions must file this statement with the Commission. See Sections 14 and 15 of the Instructions.

• Candidates (including candidates subject to filing requirements) must file this statement in order to appear for a public office or to be called for induction.

• Designated offices and holders of designated positions must file this statement with the Commission annually.

• Other interested persons must file this statement if they are:

- Designated as a candidate for a public office.
- Designated as a holder of a public office.
- Designated as a holder of a public position.
- Designated as a holder of a public position.

ITEM 1 YOUR NAME, ADDRESS AND PHONE NUMBERS

Name Ernst, David Ernst, David Ernst, David

Address 4000 S. 160th Ave. Lincoln NE 68506

Street Address or Rural Route City State Zip

ITEM 2 OCCASION FOR FILING (Check Appropriate Box)

☐ A candidate for elective office ☐ Left office or position

☒ Annual officeholder's or public employee's report ☐ Newly appointed to office or position

ITEM 3 OFFICE HELD & TERM OF OFFICE (Incumbent elected/appointed officials and state employees. See 16 of Instructions.)

Is the office a public office, state or local government, or the federal government? ☒ Yes ☐ No

Office or Position State Council of Education Term 2022-2023

Name of City, County, District, or State Agency State District 16 Dept of Education

ITEM 4 OFFICE SOUGHT (Candidates only. See 14 of Instructions.)

List the office sought which requires filing. If none, leave blank.

Office NA

Name of City, County, District, or State Office NA

ITEM 5 PERIOD COVERED BY THIS STATEMENT

This statement must cover all financial interests for the entire "preceding calendar year" and not just an individual. If you have left office, the statement must cover all financial interests from the end of the calendar year for which you previously filed or to the end including the date you left office.

☒ This statement covers the preceding calendar year (January 1 through December 31) 2022

☐ Left office. This statement covers the period January 1, _____ to _____

DATE YOU LEFT OFFICE OR POSITION

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	
441 Cottonwood Drive LINCOLN NE 68510	Home - 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	
Union Bank and Trust Company LPS Credit Union Employee 5621 N Street	

(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

US Bonds

(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 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.) DPS Nebraska Teachers Retirement2.) Social Security3.) Ham Hartford

4.)

*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 NONE1.) Nebraska Board of Ed
President2.) Nebraskans for the Arts Board
Member3.) NSEA Member4.) NSEA and LSA Retired

5.)

6.)

7.)

ITEM 8 REAL PROPERTY OF THE FILER IN NEBRASKA (Real property valued at less than \$1,000 and your personal residence need not be reported.)

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.

Catharina A. Kach Johnson
March 8, 2023

(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.