

AMENDED

EM 4-1-24

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION 1225 L St., Suite 400 P.O. Box 95086 Lincoln, NE 68509 (402) 471-2522 https://nadc.nebraska.gov	STATEMENT OF FINANCIAL INTERESTS Calendar Year 2023 NADC FORM C-1	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; padding: 2px;">POSTMARK DATE</td> <td style="width: 85%; text-align: center; padding: 2px;">XXXXXX</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 S APR 01 2024 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION </td> </tr> </table>	POSTMARK DATE	XXXXXX	OFFICE USE ONLY		RECEIVED S APR 01 2024 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION	
POSTMARK DATE	XXXXXX							
OFFICE USE ONLY								
RECEIVED S APR 01 2024 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION								

**BEFORE COMPLETING
READ FILING REQUIREMENTS**

- This statement must cover all financial interests for the entire "calendar year" as noted above and not just as of year-end.
- 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 \$5,000.

ITEM 1	YOUR NAME, ADDRESS AND PHONE NUMBER
Name	Fernandez Luis J Telephone No. 531-226-3223 LAST FIRST MIDDLE
E-mail	<u>ljfernandez@oppd.com</u>
Address	301 S 112th Street Lincoln NE 68520 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 ☐ 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 Office or Position: <u>President & CEO</u> Term: <u>N/A</u> BEGINS ENDS Name of City, County, District, or State Agency: <u>Omaha Public Power District</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. This statement covers the preceding calendar year January 1 through December 31, <u>2023</u>	

X
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.)**

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

Wells Fargo Bank, NE - Checking Account

1919 Douglas Street
Omaha, Ne 68102

First National Bank of Omaha - Savings Account

1501 N 84th Street
Lincoln, Ne 68505

(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

NONE All my financial interest and property reported under item 9 were either held at the checking and money market accounts listed in 9a or in the deferred benefit pension plans and 401K plans for my current and former employers. I do not actively invest or direct investments on any individual stocks, bonds or government securities. Aside the deferred benefit plans listed under 9c, additional holdings of individual stocks, bonds or government securities, are listed in the attachment

(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

1) OPPD Pension Plan and Supplemental Pension Plan

No ability to direct investment selection

2) OPPD 401K Retirement plan

-Target 2035 Fund

3) Federal Employee Retirement System Pension Plan

No ability to direction investment selection

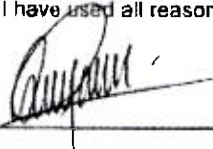
4) Federal Employee Thrift Savings Account (TSA) 401K Pension Plan - Lifecycle Fund L2040 - Raymond James 401K Retirement Plan

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			
OPPD Employee Credit Union - Car Loan Alliant Credit Union - Car Loan		444 S 16 th Street Mall, Omaha, Ne 68102 11545 West, E Touhy Avenue, Chicago, IL 60666	

X

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>NONE</i>		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	SUPPLEMENTAL INFORMATION (please attach any supplemental info and note below to see attached)
ITEM 13	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)	<i>1-23-24</i> (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.