

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION P.O. Box 95086 Lincoln, NE 68509 (402) 471-2522 https://nadcd.nebraska.gov	STATEMENT OF FINANCIAL INTERESTS Calendar Year 2025 NADC FORM C-1	POSTMARK DATE OFFICE USE ONLY RECEIVED <i>Amer</i> FEB 23 2026 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	<u>Neumann Charles Francis</u> LAST FIRST MIDDLE Telephone No. <u>408-461-7844</u>	
E-mail	<u>marglou.neumann@yahoo.com</u>	
Address	<u>908 N. Kansas</u> STREET ADDRESS OR RURAL ROUTE <u>Hastings</u> CITY <u>Ne 68901</u> 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 ☐ Amendment		
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>NPERB</u> Term: <u>2024</u> <u>2026</u> BEGINS ENDS Name of City, County, District, or State Agency: <u>Lincoln, Ne</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>2025</u>		

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.

Also include your Government position if you were paid more than \$1,000.

1.) Adams County Govt
400 W. 4th St
Hastings, Ne 68901

1a.) County Commissioner

2.) _____

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.) B & N Livestock
908 W. Kansas
Hastings, Ne 68901

1a.)

partner - Livestock Production

2.) Midland Area Agency on Aging
West 2nd
Hastings, Ne 68901

2a.)

Chairman - Governing Board

3.) Southcentral Health District
602 N. Minnesota
Hastings, Ne 68901

3a.)

Secretary of the Board

4.) Neumann Farms, Inc
Atchison, Kansas

4a.)

Shareholder - Board Member

5.) Southview Village Apt.
Rearney, Ne

5a.)

Shareholder - Board Member

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 *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

1318 Sheridan
Hastings, Ne
468 acres - Farmground
Hall Co, Nebraska - 2 miles
W. of Hwy 281 on Rosedale
Road on the North side

Rental

crop production

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

Five Points Bank of
Hastings

Osborne Drive West
Hastings, Ne

(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

Charles Schwab
U. S. Bonds
Retirement - NPEERS
Fund

(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

1/2 interest - 70 Beef cow

1/2 interest - 400 lb Feeder cattle

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			
<i>Five Points Bank of Hastings</i> <i>First Dakota National Bank</i>		<i>Osborne Drive West</i> <i>Hastings, Ne</i> <i>P.O. Box 495</i> <i>Hankston, S.D</i> <i>57078</i>	
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>			
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, ATTESTATION, AND DATE		
Check one of the boxes, sign and date below. ☒ I am not an agent of a foreign principal from an adversary nation or a foreign terrorist organization, as such terms are defined in the Foreign Adversary and Terrorist Agent Registration Act. ☐ I am an agent of a foreign principal from an adversary nation or a foreign terrorist organization, as such terms are defined in the Foreign Adversary and Terrorist Agent Registration Act. 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.			
<i>Chas. F. Neumann</i>		<i>Feb. 23, 2026</i>	
(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.

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION P.O. Box 95086 Lincoln, NE 68509 (402) 471-2522 https://nadc.nebraska.gov	STATEMENT OF FINANCIAL INTERESTS Calendar Year 2025 NADC FORM C-1	POSTMARK DATE OFFICE USE ONLY  RECEIVED FEB 23 2026 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION
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ITEM 1 YOUR NAME, ADDRESS AND PHONE NUMBER		
Name	<u>Neumann</u> <u>Charles</u> <u>Francis</u> LAST FIRST MIDDLE Telephone No. <u>402-461-7844</u>	
E-mail	<u>marylou-neumann@yahoo.com</u>	
Address	<u>908 N. KANSAS Ave</u> STREET ADDRESS OR RURAL ROUTE <u>Hastings</u> <u>Ne</u> <u>68901</u> CITY STATE ZIP CODE	
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☐ A candidate for elective office ☒ Annual officeholder's or state employee's report ☐ Newly appointed to office or position ☐ Amendment		
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>Adams County Commissioner</u> Term: <u>1/1/2025</u> <u>1/1/2029</u> BEGINS ENDS Name of City, County, District, or State Agency: <u>Adams County Nebraska</u>		
ITEM 4 OFFICE SOUGHT (Candidates only. See 1A of instructions)		
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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.

Also include your Government position if you were paid more than \$1,000.

1.) Adams County Govt
400 W. 4th
HASTINGS, NE 689011a.) County Commissioner

2.) _____

2a.) _____

3.) _____

3a.) _____

4.) _____

4a.) _____

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Name and Address of Business or Organization.

Nature of Association

If you have nothing to report, write NONE

1.) B-N Livestock
928 N. KANSAS AVE
HASTINGS, NE 689011a.) partner - Livestock production2.) Midlands Area Agency on Aging
West 3rd
HASTINGS, NE 689012a.) Chairman - Governing Board3.) Southheartland Health Dist.
600 N. MINNESOTA
HASTINGS, NE 689013a.) Secretary of the Board4.) Neumann Farms, Inc
Hatchison, KS 660024a.) shareholder - Board Member5.) Southview Village Apts
Kearney, NE5a.) shareholder - Board member

6.) _____

6a.) _____

7.) _____

7a.) _____

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Location of Property
(Description or Address)Nature of Property
(such as: agricultural, commercial, industrial, residential-rental)

If you have nothing to report, write NONE

1318 Sheridan - Hastings, Ne
68901

Rental

468 Acres Farmground
Hall Co. Nebr. - 2 mi West of
Highway 281 on Rosedale Road on
the North side

crop production

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

Five Points Bank of Hastings

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

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Charles Schwab
U.S. Bonds
Retirement Fund - NPERS

(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.

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1/2 interest in 70 Beef cows
1/2 interest in 400 hd feeder cattle

ITEM 10	CREDITORS TO WHOM \$1,000 OR MORE WAS OWED OR GUARANTEED BY YOU OR A MEMBER OF YOUR IMMEDIATE FAMILY.		
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Name		Address	
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Five Points Bank - Hastings First DAKOTA National Bank		Osborn Drive West Hastings, Ne P.O. Box 495 Yankton, S.D. 57078	
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Check one of the boxes, sign and date below. ☒ I am not an agent of a foreign principal from an adversary nation or a foreign terrorist organization, as such terms are defined in the Foreign Adversary and Terrorist Agent Registration Act. ☐ I am an agent of a foreign principal from an adversary nation or a foreign terrorist organization, as such terms are defined in the Foreign Adversary and Terrorist Agent Registration Act. 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.			
Chas. F. Neumann (Signature of Filer)		Feb. 23, 2026 (Date)	

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NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION 11 th Floor, State Capitol 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;">2/9/25</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;"> RECEIVED FEB 11 2026 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION </td> </tr> </table>	POSTMARK DATE	2/9/25	MICROFILM NUMBER		OFFICE USE ONLY		RECEIVED FEB 11 2026 NEBRASKA ACCOUNTABILITY and DISCLOSURE COMMISSION	
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ITEM 1 YOUR NAME, ADDRESS AND PHONE NUMBER

Name: Neumann, Charles Francis Telephone No. 402-461-7844

Address: 908 N. KAUSAS Hastings Ne 68901

LAST FIRST MIDDLE 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
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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: 1) Adams County Commissioner Term: 1/1/2025 12/31/2028

2) NPERB BOARD 4/1/24 4/1/2026

Name of City, County, District, or State Agency: 1) Adams County 2) NPERB - Lincoln, NE

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

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- ☒ This statement covers the preceding calendar year January 1 through December 31, 2025
- ☐ 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

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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.

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1.) Adams County Govt.
400 W. 4th St.
Hastings, Ne 68901

1a.)

2.)

2a.)

3.)

3a.)

4.)

4a.)

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908 N. KAUSAS
HASTINGS, Ne 68901

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partner - Livestock production2.) Midlands Area Agency on Aging
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Atchison, Ks 66002

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Five Points Bank First Dakota National Bank	Hastings, Ne 68901 P.O. Box 495 Yankton, SD 57078

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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:	
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ITEM 12	SIGNATURE OF FILER AND DATE.
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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.

Chas F. Heumann *Feb. 5, 2026*
(Signature of Filer) (Date)

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