

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION 1225 L Street, Suite 400 P.O. Box 95086 Lincoln, NE 68509 (402) 471-2522 www.nadc.nebraska.gov BEFORE COMPLETING THIS FORM READ THE GENERAL INFORMATION FILING REQUIREMENTS ON PAGE 4		REGISTRATION OF A SUPPLEMENTAL FILER NADC FORM SF-1		POSTMARK DATE		5/1/2026		
				MICROFILM NUMBER				
				OFFICE USE ONLY				
				Amended On: 5/1/2026 4:14:00 PM				
• Nebraska Business: Select Business “Nebraska Business” if you are a corporation, labor organization, limited liability company, limited liability partnership, industry, trade or professional association doing business in Nebraska, or if you are organized under Nebraska law. • Out of State Business: Select Business “Out of State Business” if you are a corporation, labor organization, or an industry, trade or professional association which is not doing business in Nebraska. • Individual: Select “Individual” if you are required to file on behalf of an individual person (yourself, or someone else who is not a committee, business or entity). • Other Entity: All others select “Other Entity”.								
ITEM 1		NATURE OF FILING (Check Appropriate Box)						
		☐ This is an initial filing		☒ This is an amendment(complete Item 2 and other items to be amended)				
ITEM 2		SUPPLEMENTAL FILER INFORMATION						
THIS ADDRESS WILL BE USED BY THE COMMISSION FOR CORRESPONDING WITH THE FILER								
Supplemental Filer Type:		Nebraska Business Supplemental Filer				Registration Date: 5/1/2026		
Business Name:		NEBRASKA GROUNDSWELL						
Address:		301 CENTENNIAL MALL S., STE. 94622		LINCOLN	NE	68508		
		STREET ADDRESS		CITY	STATE	ZIP CODE		
Mailing Address:		P.O. BOX 94622		LINCOLN	NE	68509		
		STREET ADDRESS		CITY	STATE	ZIP CODE		
TelePhone No:		(402) 770-5756		Email Address:		HEIDI@NEBRASKAGROUNDSWELL.ORG		
ITEM 3		NATURE OF COMMITTEE (Check Appropriate Box)						
		☐ Individual Supplemental Filer		☒ Nebraska Business Supplemental Filer				
		☐ Other Entity Supplemental Filer		☐ Out of State Business Supplemental Filer				
ITEM 4		NAME, ADDRESS AND TELEPHONE NUMBER OF THE OFFICERS AND MEMBERS OF THE FILER						
Position		Name		Address	City	State	Zip code	Telephone No.
Primary Agent		HEIDI UHING		206 S. 13TH ST. #800	LINCOLN	NE	68508	(402) 770-5756
ITEM 5		SIGNATURE OF FILER AND DATE						
HEIDI UHING		PRIMARY AGENT				5/1/2026		
(Signature of Filer)		(e - Signature Title)				Date		