

NEBRASKA ACCOUNTABILITY AND DISCLOSURE COMMISSION 1225 L Street, Suite 400 P.O. Box 95086 Lincoln, NE 68509 (402) 471-2522 www.nadc.nebraska.gov		REGISTRATION OF A SUPPLEMENTAL FILER NADC FORM SF-1		POSTMARK DATE 8/24/2023		
				MICROFILM NUMBER		
				OFFICE USE ONLY		
BEFORE COMPLETING THIS FORM READ THE GENERAL INFORMATION FILING REQUIREMENTS ON PAGE 4						
- 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: <u>Individual Supplemental Filer</u> Registration Date: <u>8/24/2023</u>						
Filer Name: <u>BRINKER HARDING</u>						
Address: <u>212 S. 109TH STREET</u> <u>OMAHA</u> <u>NE</u> <u>68144</u>						
STREET ADDRESS CITY STATE ZIP CODE						
Mailing Address: <u>212 S. 109TH STREET</u> <u>OMAHA</u> <u>NE</u> <u>68144</u>						
STREET ADDRESS CITY STATE ZIP CODE						
TelePhone No: <u>(402) 214-4448</u> Email Address: <u>BRINKER.HARDING@COLLIERS.COM</u>						
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	BRINKER HARDING	212 S. 109TH STREET	OMAHA	NE	68144	(402) 214-4448x____
ITEM 5 SIGNATURE OF FILER AND DATE						
Entered by NADC Admin User				8/24/2023		
(Signature of Filer)		(e - Signature Title)		Date		