

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		3/3/2025		
				MICROFILM NUMBER				
				OFFICE USE ONLY				
				Amended On: 3/3/2025 3:04:00 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: 3/3/2025		
Business Name:		NEBRASKA DONOR ALLIANCE						
Address:		9706 REDMAN AVENUE		OMAHA	NE	68134		
		STREET ADDRESS		CITY	STATE	ZIP CODE		
Mailing Address:		9706 REDMAN AVENUE		OMAHA	NE	68134		
		STREET ADDRESS		CITY	STATE	ZIP CODE		
TelePhone No:		(402) 968-3762		Email Address:		NADC@NEBRASKA.GOV		
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		LISA COOK		9706 REDMAN AVENUE	OMAHA	NE	68134	(402) 968-3762
ITEM 5		SIGNATURE OF FILER AND DATE						
Entered by NADC Admin User						3/3/2025		
(Signature of Filer)		(e - Signature Title)				Date		