

<p>Form 5500</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p>This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).</p> <p>▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: 24pt; font-weight: bold;">2022</p> <hr/> <p>This Form is Open to Public Inspection</p>
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Part I	Annual Report Identification Information
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2023</u> and ending <u>01/01/2023</u>	
A	This return/report is for: <input type="checkbox"/> a multiemployer plan <input checked="" type="checkbox"/> a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
	<input type="checkbox"/> a single-employer plan <input type="checkbox"/> a DFE (specify) _____
B	This return/report is: <input type="checkbox"/> the first return/report <input checked="" type="checkbox"/> the final return/report
	<input type="checkbox"/> an amended return/report <input checked="" type="checkbox"/> a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ <input type="checkbox"/>
D	Check box if filing under: <input checked="" type="checkbox"/> Form 5558 <input type="checkbox"/> automatic extension <input type="checkbox"/> the DFVC program
	<input type="checkbox"/> special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ <input type="checkbox"/>

Part II	Basic Plan Information —enter all requested information
1a Name of plan <u>NEBRASKA BANKERS ASSN VEBA GROUP INSUR HDHP PLANS</u>	1b Three-digit plan number (PN) ▶ <u>502</u>
	1c Effective date of plan <u>01/01/2016</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>NEBRASKA BANKERS ASSN VOLUNTARY EMPLOYEES BENEFICIARY ASSOCIATION</u> <u>P.O. BOX 80008</u> <u>LINCOLN, NE 68501-0008</u>	2b Employer Identification Number (EIN) <u>47-6092059</u>
	2c Plan Sponsor's telephone number <u>402-474-1555</u>
	2d Business code (see instructions) <u>522110</u>

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/16/2023	DALLEN GEORGE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2022)
v. 220413

<p>3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor</p> <p>NEBRASKA BANKERS INSURANCE & SERVICES CO.</p> <p>P.O. BOX 80008 LINCOLN, NE 68501-0008</p>	<p>3b Administrator's EIN 47-0639387</p> <p>3c Administrator's telephone number 402-474-1555</p>		
<p>4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:</p> <p>a Sponsor's name</p> <p>c Plan Name</p>	<p>4b EIN</p> <p>4d PN</p>		
<p>5 Total number of participants at the beginning of the plan year</p>	<p>5 2056</p>		
<p>6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1), 6a(2), 6b, 6c, and 6d).</p> <p>a(1) Total number of active participants at the beginning of the plan year</p> <p>a(2) Total number of active participants at the end of the plan year</p> <p>b Retired or separated participants receiving benefits</p> <p>c Other retired or separated participants entitled to future benefits.....</p> <p>d Subtotal. Add lines 6a(2), 6b, and 6c.....</p> <p>e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.</p> <p>f Total. Add lines 6d and 6e</p> <p>g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....</p> <p>h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....</p>	<p>6a(1) 2056</p> <p>6a(2) 0</p> <p>6b 0</p> <p>6c 0</p> <p>6d 0</p> <p>6e</p> <p>6f 0</p> <p>6g</p> <p>6h</p>		
<p>7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)</p>	<p>7</p>		
<p>8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:</p> <p>b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:</p> <p>4A</p>			
<p>9a Plan funding arrangement (check all that apply)</p> <p>(1) <input type="checkbox"/> Insurance</p> <p>(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts</p> <p>(3) <input checked="" type="checkbox"/> Trust</p> <p>(4) <input type="checkbox"/> General assets of the sponsor</p>	<p>9b Plan benefit arrangement (check all that apply)</p> <p>(1) <input type="checkbox"/> Insurance</p> <p>(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts</p> <p>(3) <input checked="" type="checkbox"/> Trust</p> <p>(4) <input type="checkbox"/> General assets of the sponsor</p>		
<p>10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)</p> <table style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> <p>a Pension Schedules</p> <p>(1) <input type="checkbox"/> R (Retirement Plan Information)</p> <p>(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary</p> <p>(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary</p> </td> <td style="width:50%; vertical-align: top;"> <p>b General Schedules</p> <p>(1) <input checked="" type="checkbox"/> H (Financial Information)</p> <p>(2) <input type="checkbox"/> I (Financial Information – Small Plan)</p> <p>(3) <input type="checkbox"/> A (Insurance Information)</p> <p>(4) <input type="checkbox"/> C (Service Provider Information)</p> <p>(5) <input type="checkbox"/> D (DFE/Participating Plan Information)</p> <p>(6) <input type="checkbox"/> G (Financial Transaction Schedules)</p> </td> </tr> </table>		<p>a Pension Schedules</p> <p>(1) <input type="checkbox"/> R (Retirement Plan Information)</p> <p>(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary</p> <p>(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary</p>	<p>b General Schedules</p> <p>(1) <input checked="" type="checkbox"/> H (Financial Information)</p> <p>(2) <input type="checkbox"/> I (Financial Information – Small Plan)</p> <p>(3) <input type="checkbox"/> A (Insurance Information)</p> <p>(4) <input type="checkbox"/> C (Service Provider Information)</p> <p>(5) <input type="checkbox"/> D (DFE/Participating Plan Information)</p> <p>(6) <input type="checkbox"/> G (Financial Transaction Schedules)</p>
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Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) Yes No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) Yes No

11c Enter the Receipt Confirmation Code for the 2022 Form M-1 annual report. If the plan was not required to file the 2022 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code 130263572

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2023 and ending 01/01/2023	
A Name of plan NEBRASKA BANKERS ASSN VEBA GROUP INSUR HDHP PLANS	B Three-digit plan number (PN) ▶ 502
C Plan sponsor's name as shown on line 2a of Form 5500 NEBRASKA BANKERS ASSN VOLUNTARY EMPLOYEES BENEFICIARY ASSOCIATION	D Employer Identification Number (EIN) 47-6092059

Part I	Asset and Liability Statement
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1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions.....	1b(1)	
(2) Participant contributions.....	1b(2)	
(3) Other.....	1b(3)	896263
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	2935374
(2) U.S. Government securities.....	1c(2)	15274474
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred.....	1c(3)(A)	
(B) All other.....	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred.....	1c(4)(A)	
(B) Common.....	1c(4)(B)	
(5) Partnership/joint venture interests.....	1c(5)	
(6) Real estate (other than employer real property).....	1c(6)	
(7) Loans (other than to participants).....	1c(7)	
(8) Participant loans.....	1c(8)	
(9) Value of interest in common/collective trusts.....	1c(9)	
(10) Value of interest in pooled separate accounts.....	1c(10)	
(11) Value of interest in master trust investment accounts.....	1c(11)	
(12) Value of interest in 103-12 investment entities.....	1c(12)	
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	
(15) Other.....	1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e	16293	
f Total assets (add all amounts in lines 1a through 1e).....	1f	19122404	0

Liabilities

g Benefit claims payable.....	1g	3243287	
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	21615234	
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	24858521	

Net Assets

l Net assets (subtract line 1k from line 1f).....	1l	-5736117	0
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		
(2) Dividends: (A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	-3243287	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		-3243287
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		
j Total expenses. Add all expense amounts in column (b) and enter total	2j		-3243287
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		3243287
l Transfers of assets:			
(1) To this plan	2l(1)		2492830
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

- (1) Unmodified (2) Qualified (3) Disclaimer (4) Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

- (1) DOL Regulation 2520.103-8 (2) DOL Regulation 2520.103-12(d) (3) neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: FORVIS, LLP

(2) EIN: 44-0160260

d The opinion of an independent qualified public accountant is **not attached** because:

- (1) This form is filed for a CCT, PSA, or MTIA. (2) It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)

	Yes	No	Amount
4a		X	

		Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....	4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....	4d		X	
e Was this plan covered by a fidelity bond?.....	4e	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?.....	4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....	4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	4i		X	
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.).....	4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....	4k	X		
l Has the plan failed to provide any benefit when due under the plan?.....	4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....	4m			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.....	4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... Yes No
 If "Yes," enter the amount of any plan assets that reverted to the employer this year 0.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
NEBRASKA BANKERS ASSN. VEBA GROUP INSUR PPO PLANS	47-6092059	501

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined
 If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

**Nebraska Bankers
Association
Voluntary Employees'
Beneficiary Association
Group Insurance HDHP Plans**

EIN 47-6092059 PN 502

**Independent Auditor's Report and Financial
Statements**

January 1, 2023 and December 31, 2022

**Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans
January 1, 2023 and December 31, 2022**

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1120 S. 101st Street, Suite 410 / Omaha, NE 68124

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Independent Auditor's Report

Plan Administrator & Trustees
Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans
Lincoln, Nebraska

Opinion

We have audited the financial statements of the Nebraska Bankers Association Voluntary Employees' Beneficiary Association Group Insurance HDHP Plans, an employee benefit plan subject to the *Employee Retirement Income Security Act of 1974 (ERISA)*, which comprise the statements of net assets available for benefits and plan's benefit obligations as of January 1, 2023 and December 31, 2022, and the related statements of changes in net assets available for benefits and changes in plan's benefit obligations for the day ended January 1, 2023 and year ended December 31, 2022 and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of the Plan as of January 1, 2023 and December 31, 2022 and the changes in its net assets available for benefits for the day ended January 1, 2023 and year ended December 31, 2022, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Nebraska Bankers Association Voluntary Employees' Beneficiary Association Group Insurance HDHP Plans' ability to continue as a going concern within one year after the date that these financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the plan, and determining that the plan's transactions that are presented and disclosed in the financial statements are in conformity with the plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plans' internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plans' ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules listed in the table of contents are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including its form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedules are fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

FORVIS,LLP

Omaha, Nebraska
October 16, 2023

Federal Employee Identification Number: 44-0160260

**Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans**

**Statements of Net Assets Available for Benefits
January 1, 2023 and December 31, 2022**

Assets

	2023	2022
Investments, at Fair Value		
Insured deposit accounts	\$ -	\$ 2,935,374
Pooled investment fund	-	15,274,474
	-	18,209,848
Pharmacy Rebate Receivable	-	896,263
Database Software, Net of Amortization	-	16,293
	-	19,122,404
Total assets	-	19,122,404

Liabilities

Checks in excess of deposits	-	294,963
Contributions received in advance	-	21,239,059
Amounts due to insurance companies	-	81,212
	-	21,615,234
Total liabilities	-	21,615,234
Net Assets Available for Benefits	\$ -	\$ (2,492,830)

**Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans**

**Statements of Changes in Net Assets Available for Benefits
For the Day Ended January 1, 2023 and Year Ended December 31, 2022**

	2023	2022
Contributions		
Employer	\$ -	\$ 27,263,755
COBRA	-	293,123
	-	27,556,878
Total contributions	-	27,556,878
Interest Income	-	125,158
Other Income	-	262,515
	-	27,944,551
Total additions	-	27,944,551
Deductions		
Benefits paid to participants		
Claims paid, net of credits for claims over stop loss limit and pharmacy rebates	-	26,568,397
	-	26,568,397
Administrative expense		
BlueCross BlueShield of Nebraska	-	997,511
Stop-loss premiums	-	923,866
Nebraska Bankers Insurance & Services Co.	-	701,400
Wellness program	-	33,861
Other	-	176,722
	-	2,833,360
Total deductions	-	29,401,757
Net Decrease	-	(1,457,206)
Transfer to the NBA VEBA Group Insurance PPO Plan (Plan 501)	2,492,830	-
Net Assets Available for Benefits, Beginning of Year	(2,492,830)	(1,035,624)
Net Assets Available for Benefits, End of Year	\$ -	\$ (2,492,830)

**Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans
Statements of Plan's Benefit Obligations
January 1, 2023 and December 31, 2022**

	2023	2022
Amounts Currently Payable to or for Participants, Beneficiaries and Dependents		
Claims reported but not yet paid	\$ -	\$ 676,287
Claims incurred but not reported	-	2,567,000
Plan's Total Benefit Obligation	-	\$ 3,243,287

**Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans
Statements of Changes in Plan's Benefit Obligations
For the Day Ended January 1, 2023 and Year Ended December 31, 2022**

	2023	2022
Amounts Currently Payable to or for Participants, Beneficiaries and Dependents		
Balance at beginning of year	\$ 3,243,287	\$ 288,366
Claims incurred and claims reported and approved for payment	-	29,523,318
Claims paid	-	(26,568,397)
Transfer to the NBA VEBA Group Insurance PPO Plan (Plan 501)	(3,243,287)	-
Balance at end of year	<u>\$ -</u>	<u>\$ 3,243,287</u>

**Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans**

**Notes to Financial Statements
January 1, 2023 and December 31, 2022**

Note 1: Description of the Plan

General

The following brief description of the Nebraska Bankers Association Voluntary Employees' Beneficiary Association Group Insurance HDHP Plans (Plan 502) provides only general information about the Plan's provisions. Participants should refer to the Plan agreement and Summary Plan Description for a more complete description of the Plan's provisions, which are available from the Plan Administrator.

The NBA VEBA plan and trust were created to provide group health and other benefits for employees of banks that are members of the Nebraska Bankers Association (Plan Sponsors). Participating banks define the eligibility requirements and are responsible for selecting benefits available to their eligible employees. Certain plan assets are held in a voluntary employees' beneficiary association (VEBA) trust. The plan is subject to the provisions of the *Employee Retirement Income Security Act of 1974*, as amended (ERISA).

Benefits

The Plan provides high deductible health insurance. The Plan also provides continuation of certain benefits upon termination of employment for the statutory period through the Consolidated Omnibus Budget Reconciliation Act (COBRA).

Stop-Loss Coverage

The Plan has entered into a stop-loss insurance arrangement in an effort to limit its exposure for self-insured benefits (individual participant claims over a specific dollar amount, as well as its aggregate exposure for all claims).

Self-Insured Benefits

The Plan self-insures medical insurance. The claims for self-insured benefits are processed by the Plan's third-party claims processors under administrative services only (ASO) arrangements. The claims processors pay claims directly to or on behalf of participants and are then reimbursed by the Plan's VEBA trust. Despite the Plan's utilization of third-party claim's processors, ultimate responsibility for payments to providers and participants is retained by the Plan.

The Plan utilizes a pharmacy benefit manager (PBM) which periodically makes refunds to the Plan based on the Plan's actual utilization pattern of specific drugs.

**Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans
Notes to Financial Statements
January 1, 2023 and December 31, 2022**

Note 1: Description of the Plan - Continued

Contributions

In addition to deductibles and copayments, participants contribute specified amounts, based on applicable monthly premiums for their respective benefit elections. Any deficiency of the Plan's net assets over benefit obligations is funded by adjustments to premium amounts charged to participants.

Trust Allocation

NBA VEBA Group Insurance PPO Plans (Plan 501) and NBA VEBA Group Insurance HDHP Plans (Plan 502) are funded and managed through a single trust (NBA VEBA Trust). The trustee allocates all plan contributions, claims paid and administrative expenses paid to BlueCross BlueShield of Nebraska to each of the plans by specific identification. Investment income and other administrative expenses are allocated using a ratio based on premiums received and claims paid by each plan. The Plan 502's percentage interest in the net assets of the NBA VEBA Trust was 0% and 42% for the day ended January 1, 2023 and year ended December 31, 2022 respectively.

Plan Termination

Although it has not expressed any intention to do so, the Plan Sponsors has the right under the Plan to modify the benefits provided to, and contributions required of, participants, to discontinue its contributions at any time and to terminate the Plan, subject to the provisions of ERISA. In the event of termination of the Plan, remaining assets will be applied in a uniform and nondiscriminatory manner toward the provision of benefits for or on account of the participants. No assets of the Plans may revert to the Plan Sponsors or be used for purposes other than for the exclusive benefit of the Plan's participants. See Note 7 for discussion on the Plan's merger.

Note 2: Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting.

Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans
Notes to Financial Statements
January 1, 2023 and December 31, 2022

Note 2: Summary of Significant Accounting Policies - Continued

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, benefit obligations and changes therein, eligibility credits, and disclosure of contingent assets and liabilities at the date of the financial statements. Actual results could differ from those estimates.

Payment of Benefits

Premiums paid by the VEBA Trust are recorded as premium payments in the accompanying statements of changes in net assets available for benefits. Health claim payments are recorded when paid by the third-party claims processor. Amounts due to claims processors that have yet to be reimbursed by the Plan are recorded as unremitted insurance premiums in the accompanying statements of net assets available for benefits. The third-party claims processor processes health claims of active participants, dependents and beneficiaries, but the responsibility for payments to participants and providers is retained by the Plan. These payments are recorded as claims paid in the accompanying statements of changes in net assets available for benefits.

Stop-Loss

Premiums for stop-loss insurance are included in insurance premiums paid in the accompanying statements of changes in net assets available for benefits. Stop-loss refunds totaling approximately \$0 and \$46,483 for the day ended January 1, 2023 and year ended December 31, 2022, respectively, have been netted with claims paid in the accompanying statements of changes in net assets available for benefits.

Investment Valuation and Income Recognition

The Plan's investments are carried at cost, which approximates fair value. NBA VEBA's investment policy limits investments to certificates of deposit, U.S. treasury securities, and short-term funds. Insured deposit accounts are used if the yield is equivalent to the yield available on U.S. treasury bills.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded when received.

Database Software

Database software consists of costs allocated to the Plan to develop an online enrollment system for the plans administered by NBA VEBA.

Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans
Notes to Financial Statements
January 1, 2023 and December 31, 2022

Note 2: Summary of Significant Accounting Policies - Continued

Refunds

Refunds due from the Plan's PBM are recorded when earned. Pharmacy rebates totaling \$0 and \$1,635,605 have been netted with claims paid in the accompanying statements of changes in net assets available for benefits for the day ended January 1, 2023 and year ended December 31, 2022, respectively.

Other Plan Benefits

Plan obligations for health claims incurred but not reported are estimated based upon historic claims experience and actual claims reported subsequent to the Plan's year end. Additional accruals are included for the estimated ultimate cost of future claims only if such claims are covered as of the Plan's fiscal year end and the Plans are obligated to pay for the care regardless of continued participation in the Plan.

Administrative Expenses

Administrative expenses are paid by the Plan.

Contributions Received in Advance

Contributions collected before year end that relate to coverage for the next year are reported as contributions received in advance at year end and recognized as contributions in the year to which they relate.

Revision

An immaterial revision has been made to the 2022 beginning balance of net assets available for benefits of \$576,831 for the impact of prior year payables and rebate receivable. This revision did not have a significant impact.

Note 3: Benefit Obligations

The Plan's deficiency of net assets over benefit obligations at December 31, 2022, relates primarily to the incurred but not reported benefit obligation, the funding of which may not be covered by the current contribution rate. It is expected that the deficiency will be funded through future increases in the contribution rates.

Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans
Notes to Financial Statements
January 1, 2023 and December 31, 2022

Note 4: Related-Party and Party-in-Interest Transactions

Party-in-interest transactions include those with fiduciaries or employees of the Plan, any person who provides services to the Plan, an employer whose employees are covered by the Plan, an employee organization whose members are covered by the Plan, a person who owns 50 percent or more of such an employer or employee association or relatives of such persons.

NBA VEBA is associated with the Nebraska Bankers Association (NBA), a nonprofit association of Nebraska banks. Membership in NBA is a prerequisite for participation in the plans. Nebraska Bankers Insurance and Services Co. (NBISCO), a for-profit subsidiary of NBA, is the trust administrator for the plans. During the day ended January 1, 2023 and year ended December 31, 2022, the Plan paid \$0 and \$701,400, respectively, to NBISCO for trust administration. In addition, the Plan purchases its fiduciary responsibility insurance and fidelity bond through NBISCO, which is in the business of providing this type of insurance to members of the NBA. The Plan paid NBISCO premiums of \$0 and \$390 during the day ended January 1, 2023 and year ended December 31, 2022, respectively.

NBA and NBISCO both purchase their employee group insurance through NBA VEBA. NBA and NBISCO paid premiums of \$0 and \$60,012 to the Plan during the day ended January 1, 2023 and year ended December 31, 2022, respectively.

NBISCO paid ancillary commissions to NBA VEBA of \$205,859 during 2022. These commissions are returned to NBA VEBA in relation to brokerage commissions that it received from certain fully insured products offered to members of the Trust.

The Plan maintains all cash at a participating bank. A participating bank serves as custodian of the insured deposit accounts and U.S. treasury bills. All deposits are subject to written investment policies adopted by the board of trustees that prescribe the maximum amount that may be invested and the minimum acceptable interest rate. Participating banks are parties in interest under ERISA.

The Plan Sponsors provides certain administrative services at no cost to the Plan.

Note 5: Disclosures About Fair Value of Plan Assets and Liabilities

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Fair value measurements must maximize the use of observable inputs and minimize the use of unobservable inputs. The hierarchy comprises three levels of inputs that may be used to measure fair value:

- Level 1** Quoted prices in active markets for identical assets or liabilities
- Level 2** Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities
- Level 3** Unobservable inputs supported by little or no market activity and that are significant to the fair value of the assets or liabilities

Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans
Notes to Financial Statements
January 1, 2023 and December 31, 2022

Note 5: Disclosures About Fair Value of Plan Assets and Liabilities – Continued

Recurring Measurements

The following table presents the fair value measurements of assets and liabilities recognized in the accompanying statements of net assets available for benefits measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at December 31, 2022:

	Fair Value Measurements Using			
	Fair Value	Quoted Prices in Active Market for Identical Assets (Level 1)	Significant Other Unobservable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
2022				
Insured deposit accounts	\$ 2,935,374	\$ 2,935,374	\$ -	\$ -
Pooled investment fund	15,274,474	-	15,274,474	-
Investments at fair value	<u>\$ 18,209,848</u>	<u>\$ 2,935,374</u>	<u>\$ 15,274,474</u>	<u>\$ -</u>

There were no assets or liabilities measured at fair value for the day ended January 1, 2023.

Following is a description of the valuation methodologies and inputs used for assets measured at fair value on a recurring basis and recognized in the accompanying statements of net assets available for benefits, as well as the general classification of such assets pursuant to the valuation hierarchy. There have been no significant changes in the valuation techniques during the day ended January 1, 2023 and year ended December 31, 2022. The Plan had no liabilities measured at fair value on a recurring basis. In addition, the Plan had no assets or liabilities measured at fair value on a nonrecurring basis.

Investments

Where quoted market prices are available in an active market, securities are classified within Level 1 of the valuation hierarchy. If quoted market prices are not available, then fair values are estimated by using quoted prices of securities with similar characteristics or independent asset pricing services and pricing models, the inputs of which are market-based or independently sourced market parameters, including, but not limited to, yield curves, interest rates, volatilities, prepayments, defaults, cumulative loss projections and cash flows. Such securities are classified in Level 2 of the valuation hierarchy.

Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans
Notes to Financial Statements
January 1, 2023 and December 31, 2022

Note 6: Plan Tax Status

The VEBA trust funding certain benefits of the Plans received an exemption letter from the Internal Revenue Service dated October 31, 1974, stating that the trust, as then designed, was tax-exempt under the provisions of Section 501(c)9 of the Internal Revenue Code. However, as a result of the Plan's funding policy, from time to time the trust may be subject to income taxes. No federal or state income taxes have been recorded in the financial statements. The Plan Administrator believes that the Plans and related trust are currently being operated in compliance with the applicable requirements of the Internal Revenue Code.

Note 7: Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at January 1, 2023 and December 31, 2022, to Form 5500:

	2023	2022
Net deficit per the financial statements	\$ -	\$ (2,492,830)
Benefit obligations currently payable	-	(3,243,287)
Net deficit per Form 5500	\$ -	\$ (5,736,117)

The following is a reconciliation of benefits paid to participants per the financial statements for the period ended January 1, 2023 and December 31, 2022, to Form 5500:

	2023	2022
Benefits paid to participants per the financial statements	\$ -	\$ 26,568,397
Add: Claims payable and claims incurred but not reportable end of year	-	3,243,287
Less: Claims payable and claims incurred but not reportable beginning of year	-	(2,909,864)
Less: Transfer to the NBA VEBA Group Insurance PPO Plan	(3,243,287)	-
Benefits paid to participants per Form 5500	\$ (3,243,287)	\$ 26,901,820

Total income per the 2022 financial statements is \$2,070,519 higher than the 2022 Form 5500 due to the return being updated to reflect the Statement of Plan Benefit Obligation and Statement of Changes in Plan Benefit Obligations. The amounts on these statements had not been previously included in the Form 5000.

Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans
Notes to Financial Statements
January 1, 2023 and December 31, 2022

Note 8: Risks and Uncertainties

The actuarial present value of benefit obligations is reported based on certain assumptions pertaining to interest rates, health care inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimation and assumption process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

Note 9: Transfer of Plan Assets

On January 1, 2023 Nebraska Bankers Association Voluntary Employees' Beneficiary Association Group Insurance HDHP Plans (Plan 502) merged into the Nebraska Bankers Association Voluntary Employees' Beneficiary Association Group Insurance PPO Plans (Plan 501). A deficit of \$3,389,093 was rolled into the Nebraska Bankers Association Voluntary Employees' Beneficiary Association Group Insurance PPO Plans (Plan 501) on the day ended January 1, 2023, and is included as a transfer on the statements of changes in net assets available for benefits.

Note 10: Subsequent Events

Subsequent events have been evaluated through October 16, 2023 which is the date the financial statements were available to be issued.

Supplemental Schedules

**Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans**

47-6092059 PN 502

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

<u>Identity of Issuer</u>		<u>Description of Investment</u>		<u>Current Value</u>
<u>Bank</u>	<u>City, State</u>	<u>Rate</u>	<u>Maturity</u>	
* Insured deposit accounts (FDIC insured demand accounts at various unrelated banks. Custodian is party-in-interest)		3.83%	N/A	\$ 2,935,374
Pooled Investment Fund:				
IR&M Short Fund, LLC			12/31/2024	<u>15,274,474</u>
				<u>\$ 18,209,848</u>
* Indicates party-in-interest				

**Nebraska Bankers Association
Voluntary Employees' Beneficiary Association
Group Insurance HDHP Plans**

47-6092059 PN 502

**Schedule H, Line 4j – Schedule of Reportable Transactions
Year Ended December 31, 2022**

Identity	Description	Purchase Price	Selling Price	Expenses Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
IR&M Short Fund	Investment Fund	\$ 15,274,474	\$ -	\$ -	\$ 15,274,474	\$ 15,274,474	\$ -
Insured deposit accounts	3.83% Demand Account	\$ 29,866,278	\$ -	\$ -	\$ 29,866,278	\$ 29,866,278	\$ -
Insured deposit accounts	3.83% Demand Account	\$ -	\$ 54,137,589	\$ -	\$ 54,137,589	\$ 54,137,589	\$ -

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

► **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2022

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2022 or fiscal plan year beginning 01/01/2023 and ending 01/01/2023

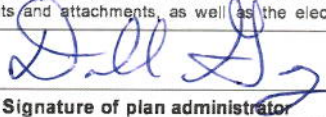
- A** This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions)
- B** This return/report is: a single-employer plan a DFE (specify) _____
 the first return/report the final return/report
 an amended return/report a short plan year return/report (less than 12 months)
- C** If the plan is a collectively-bargained plan, check here
- D** Check box if filing under: Form 5558 automatic extension the DFVC program
 special extension (enter description)
- E** If this is a retroactively adopted plan permitted by SECURE Act section 201, check here

Part II Basic Plan Information - enter all requested information

1a Name of plan NEBRASKA BANKERS ASSN VEBA GROUP INSUR HDHP PLANS	1b Three-digit plan number (PN) ► 502
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) NEBRASKA BANKERS ASSN VOLUNTARY EMPLOYEES BENEFICIARY ASSOCIATION P.O. BOX 80008 LINCOLN, NE 68501-0008	1c Effective date of plan 01/01/2016 2b Employer Identification Number (EIN) 47-6092059 2c Plan Sponsor's telephone number 402-474-1555 2d Business code (see instructions) 522110

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE		10/16/2023	DALLEN GEORGE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2022)
v. 220413

3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor NEBRASKA BANKERS INSURANCE & SERVICES CO. P.O. BOX 80008 LINCOLN, NE 68501-0008	3b Administrator's EIN 47-0639387 3c Administrator's telephone number 402-474-1555
--	---

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:	4b EIN
a Sponsor's name	4d PN
c Plan Name	
5 Total number of participants at the beginning of the plan year	5 2056
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1), 6a(2), 6b, 6c, and 6d).	
a(1) Total number of active participants at the beginning of the plan year	6a(1) 2056
a(2) Total number of active participants at the end of the plan year	6a(2) 0
b Retired or separated participants receiving benefits	6b 0
c Other retired or separated participants entitled to future benefits	6c 0
d Subtotal. Add lines 6a(2), 6b, and 6c.	6d 0
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 0
f Total. Add lines 6d and 6e.	6f 0
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 0
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:
 4A

9a Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules (1) <input type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information - Small Plan) (3) <input type="checkbox"/> A (Insurance Information) (4) <input type="checkbox"/> C (Service Provider Information) (5) <input type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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Nebraska Banker's Association VEBA Group Insurance HDHP Plans

EIN - 47-6092059

Plan Number 502

Multiple-Employer Plan Participating Employer Information

Name	EIN	Percent of Total Contributions
Adams Bank & Trust - AIA - North Platte, NE	47-0467141	0.40%
Adams Bank & Trust - North Platte, NE	47-0467141	1.76%
American Exchange Bank - Elmwood, NE	47-0090860	0.46%
Bank of Dixon County - Ponca, NE	47-0098080	0.15%
Bank of Elgin - Elgin, NE	47-0098100	0.34%
Bank of Hartington - Hartington, NE	47-0184498	0.95%
Bank of Prague - Prague, NE	47-0098260	0.26%
Bank of Steinauer - Steinauer, NE	47-0098300	0.12%
BankFirst - Norfolk, NE	47-0529225	1.36%
Banner Capital Bank - Harrisburg, NE	47-0486173	0.23%
Battle Creek State Bank - Battle Creek, NE	47-0100665	0.14%
Butte State Bank - Butte, NE	47-0343859	0.01%
Cattle Bank & Trust Company - Seward, NE	47-0121680	1.11%
CerescoBank - Ceresco, NE	47-0157060	0.14%
Chambers State Bank - Chambers, NE	47-0123590	0.36%
Citizens State Bank - Carleton, NE	47-0125910	0.14%
Citizens State Bank - Wisner, NE	47-0125880	3.99%
Columbus Bank & Trust Company - Columbus, NE	47-0130210	1.18%
Commerce Bank of Wyoming-Rock Springs - North Platte, NE	47-0811054	0.04%
Commercial Bank - Nelson, NE	47-0130550	0.68%
Commercial State Bank - Wausa, NE	47-0130860	1.27%
Community First Bank - Maywood, NE	47-0157697	0.14%
Community State Bank - Colon - Cedar Bluffs, NE	47-0306990	0.17%
Community Wealth Specialists, LLC - Stuart, NE	27-3901307	0.11%
Cornhusker Bank - Lincoln, NE	47-0157560	0.35%
Countryside Bank - Unadilla, NE	47-0090720	0.52%
Custer Federal State Bank - Broken Bow, NE	47-0744456	0.26%
Dundee Bank - Omaha, NE	47-0294050	1.38%
Elkhorn Valley Bank & Trust - Norfolk, NE	47-0343009	2.65%
Equitable Bank - Grand Island, NE	47-0151910	2.09%
Exchange Bank - Grand Island, NE	47-0153340	1.21%
F&M Bank - South Sioux City, NE	47-0157145	0.89%
Farmers & Merchants Bank - Ashland, NE	47-0157140	0.58%
Farmers & Merchants Bank - Milford, NE	47-0369814	1.97%
Farmers & Merchants Bank - Milligan, NE	47-0157120	0.64%
First Bank & Trust of Fullerton - Fullerton, NE	47-0162360	0.46%
First Bank and Trust Company - Minden, NE	47-0240961	0.70%
First Nebraska Bank - Columbus, NE	47-0323447	1.90%
First Northeast Bank of Nebraska - Lyons, NE	47-0227675	0.78%
First Northeast Bank of Nebraska-Ceresco - Lyons, NE	47-0227675	0.37%
First Northeast Bank of Nebraska-Fremont - Lyons, NE	47-0227675	0.10%
First Northeast Bank of Nebraska-Hooper - Lyons, NE	47-0227675	0.29%

First Northeast Bank of Nebraska-Oakland - Lyons, NE	47-0227675	0.42%
First Northeast Bank of Nebraska-Tekamah - Lyons, NE	47-0227675	0.08%
First State Bank - Farnam, NE	47-0160070	1.12%
First State Bank - Hordville, NE	47-0162760	0.38%
First State Bank - Randolph, NE	47-0162790	0.43%
First State Holding Company - Lincoln, NE	47-0593732	3.67%
First Westroads Bank - Omaha, NE	47-0497986	0.48%
FirstBank of Nebraska - Wahoo, NE	47-0326425	1.63%
FirsTier Bank - Kimball, NE	47-0412269	1.22%
Five Points Bank - Grand Island, NE	47-0803224	0.31%
Five Points Bank of Hastings - Grand Island, NE	47-0294100	0.34%
Flatwater Bank - Gothenburg, NE	47-0175510	0.90%
Flatwater Bank-Ansley - Gothenburg, NE	47-0175510	0.23%
FMS Bank - Fort Morgan, CO	84-0882445	0.62%
Frontier Bank - Omaha, NE	47-0098167	1.84%
Frontier Holdings, LLC - Omaha, NE	20-1881669	0.14%
Generations Bank - Exeter, NE	47-0162330	0.33%
Great Plains State Bank - Columbus, NE	47-0267880	0.49%
Heartland Bank - Geneva, NE	47-0171400	0.69%
Henderson State Bank - Henderson, NE	47-0343086	1.21%
Heritage Bank - Aurora, NE	47-0098350	0.81%
Homestead Bank - Schuyler - Cozad, NE	47-0135500	0.13%
Horizon Bank - Waverly, NE	47-0218913	0.78%
i3 Bank - Bennington, NE	47-0098010	1.61%
Jones Bank - Seward, NE	83-2525814	1.24%
Madison County Bank - Norfolk, NE	47-0228520	0.85%
Midwest Bank - Admin - Norfolk, NE	47-0131280	0.90%
Midwest Bank - Creighton - Norfolk, NE	47-0131280	0.37%
Midwest Bank - Deshler - Norfolk, NE	47-0131280	0.22%
Midwest Bank - Lincoln - Norfolk, NE	47-0131280	0.45%
Midwest Bank - Loan Processing - Norfolk, NE	47-0131280	0.81%
Midwest Bank - Midtown - Norfolk, NE	47-0131280	0.15%
Midwest Bank - Norfolk - Norfolk, NE	47-0131280	0.42%
Midwest Bank - Operations - Norfolk, NE	47-0131280	0.42%
Midwest Bank - Pierce - Norfolk, NE	47-0131280	0.75%
Midwest Bank - Pilger - Norfolk, NE	47-0131280	0.24%
Midwest Bank - Plainview - Norfolk, NE	47-0131280	0.31%
Midwest Bank - Redstone Bank - Norfolk, NE	47-0131280	0.90%
Midwest Bank - West Point - Norfolk, NE	47-0131280	0.12%
Midwest Bank - Wisner - Norfolk, NE	47-0131280	0.17%
Midwest Bank - York - Norfolk, NE	47-0131280	0.25%
MNB Bank - McCook, NE	47-0233940	2.19%
MNB Insurance Agency - McCook, NE	47-0679670	0.46%
MNB Realty, LLC - McCook, NE	83-4588424	0.02%
Nebraska Bank of Commerce - Lincoln, NE	26-1441291	0.85%
Nebraska Bank of Commerce-NBC Trust Co - Lincoln, NE	47-3552599	0.15%
Nebraska Bankers Association - Lincoln, NE	47-0248240	0.22%
Nebraska State Bank & Trust Co. - Broken Bow, NE	47-0249890	0.23%

Nebraska State Bank - Oshkosh, NE	47-0249940	0.36%
NebraskaLand Bank - North Platte, NE	47-0811054	0.43%
Platte Valley Companies - Scottsbluff, NE	47-0800148	12.36%
Points West Community Bank - Windsor - Sidney, NE	84-0240535	3.80%
Riverstone Bank - Eagle - Scottsbluff, NE	47-0560194	0.26%
RVR Bank - Fremont, NE	47-0423910	1.61%
Sandhills State Bank - North Platte, NE	47-0130530	2.28%
Security Bank - Laurel, NE	47-0294010	1.55%
South Central State Bank - Blue Hill, NE	47-0364892	0.85%
Stanton State Bank - Stanton, NE	47-0306280	0.38%
State Bank of Table Rock - Pawnee City, NE	47-0307110	0.04%
Thayer County Bank - Hebron, NE	47-0315920	0.28%
The Potter State Bank of Potter - Potter, NE	47-0346667	0.22%
The Tri-County Bank - Stuart, NE	47-0349189	1.37%
Town & Country Bank - Las Vegas, NV	88-0515250	0.20%
Town & Country Bank - Ravenna, NE	47-0277600	0.65%
United Republic Bank - Elkhorn, NE	01-0871157	0.15%
Waypoint Bank - Cozad, NE	47-0162290	0.11%
West Gate Bank - Lincoln, NE	47-0523112	4.12%
West Plains Bank - Ainsworth, NE	47-0130770	0.95%
Western Nebraska Bank - North Platte, NE	47-0138320	0.74%
Western States Bank - Gering, NE	20-5381849	2.09%