

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
DIVISION OF BANKING
CONSOLIDATED REPORT OF CONDITION

Trust Company Name:	First Mid Wealth Management Company
Address:	1515 Charleston Ave.
City, State, Zip	Mattoon, IL 61938
Credential Number:	TRS # 60946 <i>(5-digit number-should begin with 60)</i>

Include the institution's domestic & foreign subsidiaries, completed for the period ending as of close of business on: 6/30/2023
and submitted in response to the call of the Illinois Department of Financial and Professional Regulation.

ALTERATION OF THIS FORM IS PROHIBITED AND WILL BE CONSIDERED NON-COMPLIANCE WITH FILING REQUIREMENTS.

ASSETS

In Thousands(000)

1. Cash and Due from Depository Institution		14,917
2. U.S. Treasury Securities		0
3. Obligations of States and Political Subdivisions		0
4. Other Bonds, Notes Receivable, and Debentures		0

Itemize the Notes Receivable amount listed above:

Inter-Company/Employee/Director: _____

Other (List): _____

5. Corporate Stock		0
6. Trust Company Premises, Furniture, Fixtures and Other Assets Representing TC Premises		1,400
7. Accounts Receivable:		0

Itemize Accounts Receivable amount listed above:

Fee Accounts Receivable _____

Inter-Company Account Receivable _____

Other (List): _____

8. Goodwill		0
9. Intangibles		3,677
10. Other Assets		4,732

Itemize assets that account for 10% or greater of Line 11: (Description & Amount)

Accounts Receivable-Ag Services	3,316

11. **TOTAL ASSETS** 24,726

LIABILITIES

12. Accounts Payable		0
13. Taxes Payable		1,336
14. Other Liabilities for Borrowed Money		0
15. Other Liabilities		5,832

Itemize Liabilities that account for 10% or greater of Line 15) (Description & Amount)

Deferred Compensation	5,242

16. **TOTAL LIABILITIES** 7,168

EQUITY CAPITAL

17. Preferred Stock		0
18. Common Stock		0
19. Surplus		6,750
20. Reserve for Operating Expenses		0
21. Retained Earnings (Loss)		10,808

22. **TOTAL EQUITY CAPITAL** 17,558

23. **TOTAL LIABILITIES AND EQUITY CAPITAL** 24,726

Check & Balance: should equal zero - otherwise incorrect

0

Trust Company Name:
 Credential Number:

First Mid Wealth Management Company	
TRS #	60946

INCOME

In Thousands(000)

1. Income from Fiduciary Activities:

A. Estates	176
B. Personal	1,231
C. Investment Advisory	399
D. Managed Employee Benefit	577
E. Non-managed Employee Benefit	
F. Custody	111
G. Corporate Services	0
H. Land Trusts	17
I. All Other Fiduciary Activities	

2. Interest Income

3. All Other Income: (List below)

Brokerage Services Income	2,377
Farm Management/Brokerage	5,944
Other Income	28

4. TOTAL OPERATING INCOME (Sum of Items 1-3)

10,860

EXPENSES

5. Operating Expenses:

A. Salaries	4,303
B. Employee Benefits	897
C. Trust Company Occupancy Expense	185
D. Furniture and Equipment Expense	164
E. Data Services	226
F. Marketing	71
G. Audits/Examinations	21
H. Insurance (Fiduciary Activities)	1
I. All Other	744

Itemize amounts > 10% from Line I above.

Intangibles Amortization	287
Other Professional Services	128

6. TOTAL OPERATING EXPENSES

6,612

7. NET OPERATING INCOME/LOSS BEFORE TAXES

4,248

8. APPLICABLE INCOME TAXES

1,168

9. EXTRAORDINARY ITEMS

0

10. NET INCOME (LOSS) AFTER TAXES

3,080

Explain any change greater than 10% from the average of the previous quarter(s).

IF this is the first quarter of the fiscal year, disregard explanation:

Trust Company Name:

First Mid Wealth Management Company

CHANGES IN EQUITY CAPITAL

Thousands of Dollars (Year-to-Date)	PREFERRED STOCK (PAR)	COMMON STOCK (PAR)	SURPLUS & RESERVE	RETAINED EARNINGS	TOTAL EQUITY CAPITAL (Line Total)
1. Balance beginning of fiscal year	0	0	6,750	7,728	14,478
2. Net Income (loss)				3,080	3,080
3. Capital sale/conversion/acquisition/retirement	0	0	0	0	0
4. Changes incident to mergers & absorptions	0	0	0	0	0
5. Cash dividends declared on preferred stock			0	0	0
6. Cash dividends declared on common stock			0	0	0
7. Stock dividends issued	0	0	0	0	0
8. Other increases/decreases - ITEMIZE:	0	0	0	0	0
9. Ending Balance	0	0	6,750	10,808	17,558

Check & Balance: should equal zero - otherwise incorrect

NOTE: Additional Page(s) may be attached to this report if an item requires further explanation or justification.

CERTIFICATION SECTION

Person to whom Supervisory Staff should direct questions concerning this report.

I, Bradley L. Beesley, President & CEO of First Mid Wealth Management Company

(*PRINT Name and Title of Officer Authorized to Sign Report*) (*Name of Trust Company*)

do certify that the information contained in these statements are accurate to the best of my knowledge and belief. I understand that submission of false information with the intention to deceive the Secretary or his Administrative Officers is a felony.



(Signature of Officer Authorized to Sign Report)

Title

Name of Officer Above

Telephone Number (Extension)

Fax Number

E-mail Address