

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

Trust Company Name:
Address:
City, State, Zip
Credential Number:

GreatBanc Trust Company
801 Warrenville Road, Suite 500
Lisle, IL 60532
60350

Include the institution's domestic & foreign subsidiaries, completed for the period ending as of close of business on 30-Jun-23 and submitted in response to the call of the Illinois Department of Financial and Professional Regulation.

Changes to this form or its format are prohibited.

ASSETS

In Thousands(000)

1. Cash and Due from Depository Institution	53
2. U.S. Treasury Securities	0
3. Obligations of States and Political Subdivisions	0
4. Other Bonds, Notes Receivable, and Debentures	1,428

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	354
7. Accounts Receivable:	1,818

Itemize Accounts Receivable amount listed above:

Fee Accounts Receivable	1,478
Inter-Company Account Receivable	0
Other (List): Accts Receivable	0

9. Goodwill	0
10. Intangibles	5,592
11. Other Assets	828

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

Prepaid Insurance	296
Capitalized Conversion Fees	327
Prepaid Software	147

TOTAL ASSETS 10,073

LIABILITIES

12. Accounts Payable	638
13. Taxes Payable	0
14. Other Liabilities for Borrowed Money	0
15. Other Liabilities	911

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

16. TOTAL LIABILITIES 1,549

EQUITY CAPITAL

17. Preferred Stock	0
18. Common Stock	1,257
19. Surplus	4,602
20. Reserve for Operating Expenses	0
21. Retained Earnings (Loss)	2,665

22. TOTAL EQUITY CAPITAL 8,524

TOTAL LIABILITIES AND EQUITY CAPITAL 10,073

Check / should equal zero - otherwise correct 0

**DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
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CONSOLIDATED REPORT OF INCOME**

Trust Company Name:
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INCOME

In Thousands(000)

1. Income from Fiduciary Activities:

- A. Estates
- B. Personal
- C. Investment Advisory
- D. Managed Employee Benefit
- E. Non-managed Employee Benefit
- F. Custody
- G. Corporate Services
- H. Land Trusts
- I. All Other Fiduciary Activities

183
390
83
10,940
5
206
0
0
489
39
0

2. Interest Income

3. All Other Income: (List below)

Sale from Fixed Assets	0
Other Miscellaneous Income	0

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

12,335

EXPENSES

5. Operating Expenses:

- A. Salaries
- B. Employee Benefits
- C. Trust Company Occupancy Expense
- D. Furniture and Equipment Expense
- E. Data Services
- F. Marketing
- G. Audits/Examinations
- H. Insurance (Fiduciary Activities)
- I. All Other

4,854
1,085
259
87
0
340
214
449
988

Itemize amounts < than 10% Line I above.

Software Maintenance	152
Amortization of Intangibles	284

6. TOTAL OPERATING EXPENSES (Items A-I)

8,276

7. NET OPERATING INC/LOSS BEFORE TAXES

4,059

8. APPLICABLE INCOME TAXES

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9. EXTRAORDINARY ITEMS

0

10. NET INCOME (LOSS) AFTER TAXES

4,059

Explain any change greater than 10% from the average of the previous quarter(s). Note if this is the first quarter of the fiscal year disregard question:

Trust Company Name:

GreatBanc Trust Company

CHANGES IN EQUITY CAPITAL

Thousands of Dollars (Year-to-Date)

	PREFERRED STOCK (PAR)	COMMON STOCK (PAR)	SURPLUS & RESERVE	RETAINED EARNING	TOTAL EQUITY CAPITAL (Line Total)
1. Balance beginning of fiscal year	0	1,257	4,602	2,801	8,660
2. Net Income (loss)				4,059	4,059
3. Sale, conversion, acquisition, or retirement of capital					0
4. Changes incident to mergers and absorptions					0
5. Cash dividends declared on preferred stock					0
6. Cash dividends declared on common stock					0
7. Stock dividends issued					0
8. Other increases (decreases)				(4,195)	(4,195)

Itemize other:

Income Distributions to Holding Co (\$1,500)
Unrealized Gain/(Loss) \$3

9. Ending Balance

	0	1,257	4,602	2,665	8,524
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Check / should equal zero - otherwise correct

0

CERTIFICATION SECTION

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

I, Tim Weber of GreatBanc Trust Company
(Name of Officer Authorized to Sign Report) *(Name of Trust Company)*
 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.

TWel

(Signature of Officer Authorized to Sign Report)

Treasurer, CFO
Full Title/Position

Tim Weber
PRINT Name of Officer Above

630-810-4175
Telephone Number (Extension)

630-810-4504
Fax Number

tweber@greatbanctrust.com
E-mail Address