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

Trust Company Name:	UBS Asset Management Trust Company				
Address:	1 N.Wacker Drive				
City, State, Zip	Chicago, IL 60606				
Credential Number:	60376				

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

ASSETS In Thousands(000) 1,071 1. Cash and Due from Depository Institution 2. U.S. Treasury Securities 3. Obligations of States and Political Subdivisions 4. Other Bonds, Notes Receivable, and Debentures Itemize the Notes Receivable amount listed above: Inter-Company/Employee/Director: Other (List): 5. Corporate Stock 6. Trust Company Premises, Furniture, Fixtures and Other Assets Representing TC Premises 7. Accounts Receivable: 4,464 Itemize Accounts Receivable amount listed above Fee Accounts Receivable 3.410 Inter-Company Accounts Receivable 1,054 Other (List): 8. Goodwill 9. Intangibles 10. Other Assets 0 Itemize assets that account for 10% or greater of Line 11: (Description & Amount) 11. TOTAL ASSETS 5,535 LIABILITIES 12. Accounts Payable 13. Taxes Payable 143 14. Other Liabilities for Borrowed Money 15. Other Liabilities 914 Itemize Liabilities that account for 10% or greater of Line 15) (Description & Amount) Sub-advisory fee payable to Affiliates 878 Licensing fee payable to third party 0 9 Fees payable to third party Other payables 27 16. TOTAL LIABILITIES 1,057 EQUITY CAPITAL 17. Preferred Stock 18. Common Stock 750 19. Surplus 1,250 20. Reserve for Operating Expenses 21. Retained Earnings (Loss) 2,478 22. TOTAL EQUITY CAPITAL 4,478 TOTAL LIABILITIES AND EQUITY CAPITAL 23. 5.535 Check / should equal zero - otherwise correct

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

Trust Company Name:	UBS Asset Management Trust Company				
Address:	1 N.Wacker Drive				
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INCOME

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

2. Interest Income 3 All Other Income

2. Interest Income 3. All Other Income: (List below)	
Sub-Advisory Fee - Affiliate	(8,206)
Licensing fee to third party	0
Other Income	63

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

EXPENSES

5. Operating Expenses:	1
A. Salaries	1
B. Employee Benefits	1
C. Trust Company Occupancy Expense	1
D. Furniture and Equipment Expense	1
E. Data Services	1
F. Marketing	
G. Audits/Examinations	
H. Insurance (Fiduciary Activities)	
I. All Other]
Itemize amounts > than 10% Line I above.	
Referral Fees to affiliates	0
Board of Director Fees	33
Office of Banks & R/E	30
Other Expenses	0
6. TOTAL OPERATING EXPENSES (Items A-I)	
7. NET OPERATING INC/LOSS BEFORE TAXES	1
8. APPLICABLE INCOME TAXES]
9. EXTRAORDINARY ITEMS	
10. NET INCOME (LOSS) AFTER TAXES]
]

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:

8,843
109 (8,143)
(8,143)

In Thousands(000)

809

77
0
63

140
669
191
478

Trust Company Name:

UBS Asset Management Trust Company

CHANGES IN EQUITY CAPITAL

Thousands of Dollars (Year-to-Date)	PREFERRED STOCK (PAR)	COMMON STOCK (PAR)	SURPLUS & RESERVE	RETAINED	TOTAL EQUITY CAPITAL (Line Total)
 Balance beginning of fiscal year 		750	1,250	2,755	4,755
2. Net Income (loss)				478	478
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				(755)	(755)
7. Stock dividends issued					0
8. Other increases (decreases)					0
Itemize other:					
9. Ending Balance	0	750	1,250	2,478	4,478
Check / should equal zero - otherwise cor	rect				0

$C\,E\,R\,T\,I\,F\,I\,C\,A\,T\,I\,O\,N\ S\,E\,C\,T\,I\,O\,N$ Person to whom Supervisory Staff should direct questions concerning this report.

I, Karen Hu	of	UBS Asset Management Trust Company		
(PRINT Name and Title of Officer Authorized to Sign Report) do certify that the information contained in these statements are	accura	(Name of Trust Company) ite to the best of my knowledge and belief.	I understand that submission	
of false information with the intention to deceive the Secretary or	his A	dministrative Officers is a felony. Associate Director/A	ssistant Treasurer	
(Signature of Officer Authorized to Sign Report)	-	Title		
Karen Hu		312-525-6103		
Name of Officer Above	-	Telephone Number (Ex	tension)	

Fax Number

karen.hu@ubs.com

E-mail Address