

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

**Trust Company Name:**

**Address:**

**City, State, Zip**

**Credential Number:**

<b>TI-TRUST, INC.</b>
<b>2900 N 23RD STREET</b>
<b>QUINCY, IL 62305</b>
<b>TRS # 60938</b> <span style="float: right;"><i>(5-digit number-should begin with 60)</i></span>

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

**3/31/2020**

**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		4,664
2. U.S. Treasury Securities		6,875
3. Obligations of States and Political Subdivisions		201
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		1,593
7. Accounts Receivable:		1,103

**Itemize Accounts Receivable amount listed above:**

Fee Accounts Receivable 1,148

Inter-Company Account Receivable

Other (List):

Potential Uncollectible - Fees (45)

8. Goodwill		240
9. Intangibles		0
10. Other Assets		216

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

Prepaid Expense	99
Prepaid Insurance	66
Interest Receivable	51

**11. TOTAL ASSETS**

14,892

**LIABILITIES**

12. Accounts Payable		553
13. Taxes Payable		222
14. Other Liabilities for Borrowed Money		0
15. Other Liabilities		4,709

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

Deferred Fee Income	4,494
Market Value Adjustment	125
Deferred Income Tax	90

**16. TOTAL LIABILITIES**

5,484

**EQUITY CAPITAL**

17. Preferred Stock		0
18. Common Stock		31
19. Surplus		3,469
20. Reserve for Operating Expenses		0
21. Retained Earnings (Loss)		5,908

**22. TOTAL EQUITY CAPITAL**

9,408

**23. TOTAL LIABILITIES AND EQUITY CAPITAL**

14,892

*Check & Balance: should equal zero - otherwise incorrect*

0

TI-TRUST, INC.	
TRS #	60938

**In Thousands(000)**

A. Estates	2
B. Personal	456
C. Investment Advisory	67
D. Managed Employee Benefit	401
E. Non-managed Employee Benefit	1,899
F. Custody	48
G. Corporate Services	0
H. Land Trusts	1
I. All Other Fiduciary Activities	0
<b>. Interest Income</b>	49
<b>. All Other Income: ( List below )</b>	12

<b>4. TOTAL OPERATING INCOME</b> (Sum of Items 1-3)	2,935
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A. Salaries	1,316
B. Employee Benefits	187
C. Trust Company Occupancy Expense	67
D. Furniture and Equipment Expense	55
E. Data Services	140
F. Marketing	17
G. Audits/Examinations	10
H. Insurance (Fiduciary Activities)	62
I. All Other	150

Management Consultant (In Thousands)	15
Postage	16
Supplies	16

6. TOTAL OPERATING EXPENSES	2,004
7. NET OPERATING INCOME/LOSS <i>BEFORE TAXES</i>	931
8. APPLICABLE INCOME TAXES	263
9. EXTRAORDINARY ITEMS	0
10. NET INCOME (LOSS) <i>AFTER TAXES</i>	668

Changes Due To Corporate Spinoff Reallocation

Trust Company Name:

TI-TRUST, INC.

## 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		100	3,469	5,087	8,656
2. Net Income (loss)				668	668
3. Capital sale/conversion/acquisition/retirement		(69)		(5)	(74)
4. Changes incident to mergers & absorptions					0
5. Cash dividends declared on preferred stock					0
6. Cash dividends declared on common stock				0	0
7. Stock dividends issued					0
8. Other increases/decreases - ITEMIZE:				158	158
Securities Market Value Adjustment 158					
9. Ending Balance	0	31	3,469	5,908	9,408
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, JULIE KENNING

of TI-TRUST, INC.

(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)

JULIE KENNING

Name of Officer Above

217-228-8039

Fax Number

EXECUTIVE VICE PRESIDENT OF OPERATIONS

Title

217-221-8628

Telephone Number (Extension)

julie.kenning@ti-trust.com

E-mail Address