

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

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

TI-TRUST, INC.
2900 N 23RD STREET
QUINCY, IL 62305
TRS # 60938 (5-digit number-should begin with 60)

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.

12/31/2020

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		5,573
2. U.S. Treasury Securities		7,195
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		1,471
7. Accounts Receivable:		462

Itemize Accounts Receivable amount listed above:

Fee Accounts Receivable	500
Inter-Company Account Receivable	
Other (List):	

Potential Uncollectible - Fees	38
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8. Goodwill		240
9. Intangibles		0
10. Other Assets		324

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

Prepaid Expense	120
Prepaid Insurance	165
Interest Receivable	39

11. **TOTAL ASSETS** 15,466

LIABILITIES

12. Accounts Payable		996
13. Taxes Payable		(18)
14. Other Liabilities for Borrowed Money		925
15. Other Liabilities		2,678

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

Deferred Fee Income	2,463
Market Value Adjustment	90
Deferred Income Tax	125

16. **TOTAL LIABILITIES** 4,581

EQUITY CAPITAL

17. Preferred Stock		0
18. Common Stock		31
19. Surplus		3,469
20. Reserve for Operating Expenses		0
21. Retained Earnings (Loss)		7,385

22. **TOTAL EQUITY CAPITAL** 10,885

23. **TOTAL LIABILITIES AND EQUITY CAPITAL** 15,466
Check & Balance: should equal zero - otherwise incorrect 0

Trust Company Name:
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TI-TRUST, INC.	
TRS #	60938

INCOME

In Thousands(000)

1. Income from Fiduciary Activities:

A. Estates	32
B. Personal	2,011
C. Investment Advisory	288
D. Managed Employee Benefit	1,077
E. Non-managed Employee Benefit	7,713
F. Custody	214
G. Corporate Services	0
H. Land Trusts	1
I. All Other Fiduciary Activities	0
2. Interest Income	183
3. All Other Income: (List below)	11

Dividend Income (Thousands)	
Misc. Income	

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

11,530

EXPENSES

5. Operating Expenses:

A. Salaries	5,333
B. Employee Benefits	908
C. Trust Company Occupancy Expense	266
D. Furniture and Equipment Expense	215
E. Data Services	414
F. Marketing	168
G. Audits/Examinations	126
H. Insurance (Fiduciary Activities)	291
I. All Other	699

Itemize amounts > 10% from Line I above.

Director Fees (In Thousands)	113
Miscellaneous Expense	209
Supplies	70

6. TOTAL OPERATING EXPENSES

8,420

7. NET OPERATING INCOME/LOSS BEFORE TAXES

3,110

8. APPLICABLE INCOME TAXES

874

9. EXTRAORDINARY ITEMS

0

10. NET INCOME (LOSS) AFTER TAXES

2,236

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:

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	3,400	5,087	8,587
2. Net Income (loss)				2,236	2,236
3. Capital sale/conversion/acquisition/retirement		(69)	69	(5)	(5)
4. Changes incident to mergers & absorptions					0
5. Cash dividends declared on preferred stock					0
6. Cash dividends declared on common stock				(93)	(93)
7. Stock dividends issued					0
8. Other increases/decreases - ITEMIZE:				160	160
Securities Market Value Adjustment 160					
9. Ending Balance	0	31	3,469	7,385	10,885
<i>Check & Balance: should equal zero - otherwise incorrect</i>					

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)

CFO & EVP OF OPERATIONS
 Title

JULIE KENNING
 Name of Officer Above

217-221-8628
 Telephone Number (Extension)

217-228-8039
 Fax Number

julie.kenning@ti-trust.com
 E-mail Address