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

Trust Company Name:	TI-TRUST, INC.		
Address:	2900 N 23RD STREET		
City, State, Zip	QUINCY, IL 62305		
Credential Number:	TRS # 6	60938 (5-digit numb	er-should begin with 60)
Include the institution's domestic & foreign subsi and submitted in response to the call of the Illinoi			12/31/2024
ALTERATION OF THIS FORM IS PROHIB	EITED AND WILL BI	E CONSIDERED NON-COMPLIANCE WITH FILING	REQUIREMENTS.
ASSETS			In Thousands(000)
1. Cash and Due from Depository Institution			4,187
2. U.S. Treasury Securities			10,980
 Obligations of States and Political Subdivision Other Bonds, Notes Receivable, and Debentur 			1,676
Itemize the Notes Receivable amount listed a			<u>×_</u> _
Inter-Company/Employee/Director:	0		
Other (List):			
5 Commente Steple			
 Corporate Stock Trust Company Premises, Furniture, Fixtures a 	and Other Assets Re	presenting TC Premises	3,246
 Accounts Receivable: 		prosenting i o i remises	577
Itemize Accounts Receivable amount listed	above:		······································
Fee Accounts Receivable	601		
Inter-Company Account Receivable	0		
Other (List): Potential Uncollectible - Fees (Contra-Asset)	0		
8. Goodwill	24		240
9. Intangibles			356
10. Other Assets			615
Itemize assets that account for 10% or gre		Description & Amount)	
Prepaid Expense	245		
Prepaid Insurance	259		
	<u> </u>		
11. TOTAL ASSETS			21,877
LIABILITIES			
12. Accounts Payable			1,094
13. Taxes Payable			347
14. Other Liabilities for Borrowed Money			0
15. Other Liabilities			3,267
Itemize Liabilities that account for 10%	or greater of Line	15) (Description & Amount)	
Deferred Fee Income	2,928		
16. TOTAL LIABILITIES			4,708
			4,708
EQUITY CAPITAL			
17. Preferred Stock			0
18. Common Stock			31
19. Surplus			2,197
20. Reserve for Operating Expenses			0
21. Retained Earnings (Loss)			14,941
22. TOTAL EQUITY CAPITAL			17,169
		_	
23. TOTAL LIABILITIES AND EC		۱L	21,877
Check & Balance: should equal zero - other	rwise incorrect		0

EXPENSES 5. Operating Expenses: A. Salaries 6,897	Credential Number:	TRS #	60938	
1. Income from Fiduciary Activities: 26 A. Estates 26 B. Personal 3,262 C. Investment Advisory 665 D. Managed Employee Benefit 7,792 F. Custody 223 G. Corporate Services 0 H. Land Trusts 2 I. All Other Fiduciary Activities 0 S. Interest Income 468 3.41 Other Fiduciary Activities 0 Using the fiduciary Activities 0 I. All Other Fiduciary Activities 0 J. Interest Income 468 3.41 Other Fiduciary Activities 2 Long Term Capital Gain Distribution 10 Dividends Income 232 Mise Income 18 4. TOTAL OPERATING INCOME (Sum of Items 1-3) 16,165 EXPENSES 5. 5. Operating Expenses: 262 A. Salaries 6,897 B. Employee Benefits 1,467 C. Trust Company Occupancy Expense 262 D. Furniture and Equipment Expense 262 E. Data Services 608 F. Marketing		L		
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	Insurance and Bonds	491		

TI-TRUST, INC.

Director Fees	178	
6. TOTAL OPERATING EX	PENSES	11,383
7. NET OPERATING INCOM		4,782
8. APPLICABLE INCOME	TAXES	1,327
9. EXTRAORDINARY ITEM	18	0
10. NET INCOME (LOSS) AI		3,455

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:

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		31	2,039	13,335	15,405
2. Net Income (loss)				3,455	3,455
3. Capital sale/conversion/acquisition/retirement			158		158
4. Changes incident to mergers & absorptions					0
5. Cash dividends declared on preferred stock					0
6. Cash dividends declared on common stock				(1,860)	(1,860)
7. Stock dividends issued					0
8. Other increases/decreases - ITEMIZE:				11	11
Securities Market Value Adjustment 11					
9. Ending Balance Check & Balance: should equal zero - other	rwise incorrect	31	2,197	14,941	<u>17,169</u> 0

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 ac	curate 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.
Julieta o	CFO & EVP OF OPERATIONS
(Signature of Officer Authorized to Sign Report)	Title
	1000
JULIE KENNING	217-221-8628
Name of Officer Above	Telephone Number (Extension)

217-228-8039

Fax Number

E-mail Address

julie.kenning@ti-trust.com