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Form 990-P1-

Department of the Treasury Internal Revenue Service Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

			ax year beginning	<u> </u>		, 2012	2, and er	nding		, ,	
Name of f			TL BANK CHA	RTTA	ABLE	FDN. INC.		,	A	Employer identification nu 42-1451615	mber
Number a	nd stre	et (or PO box numb	er if mail is not delivere	d to stre	et addres	is)	Room/su	iite	В	Telephone number (see the	instructions)
		I STREET S	W, PO BOX 1	708			<u> </u>		<u> </u>	(641) 423-16	00
City or .ov		rmv				State	ZIP code	2 1700	С	If exemption application is	nending check here ▶ □
MASO			Instant and and	Г	7	IA		2-1708	~	ii exemption application is	pending, check here
G /Cne	еск аі	I that apply	Initial return Final return	-	_	l Return of a fo nded return	rmer pui	olic charity	D	1 Foreign organizations, che	ck here
		ı	Address chang	<u>,</u> }		e change			Ì	2 Foreign organizations mee	ting the 85% test, check
H C	heck	type of organiza		_		exempt private	foundati	on	1	here and attach computati	
ĭ			nonexempt chard			Other taxable			E	If private foundation statu	s was terminated
- Fa		ket value of all asset				method: X		Accrual	1	under section 507(b)(1)(A	
(f	rom Pa	rt II, column (c), line	16)		Other (sp		L		F	If the foundation is in a 60)-month termination —
► \$		1,129	,951.	Part 1,	colum	n (d) must be d	n cash t	basis)	1	under section 507(b)(1)(B	
Part		nalysis of Re			(a) F	Revenue and	(b) N	et investmei	nt	(c) Adjusted net	(d) Disbursements
	E	xpenses (The	total of amounts i and (d) may not n	n ocos		ises per books		ıncome	•	income	for charitable
	sa	rily equal the ar	mounts in column								purposes (cash basis only)
	(50	ee instructions)									
	1		grants, etc, received (a	- 1	139 38 ° * * * * * * * * * * * * * * * * * *	400,000.	. }**\{:\frac{1}{2}	47-1	7 / 1 / 2 6 36 3	15 16 17 18 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$6778/A-38-304-304
	2	1 1	oundn is not req to att S rings and tempora		- 100		1 2000	A Section 1	ØC 73	Marine Charles	
	, J	cash investmen		' ^y							
	4	Dividends and inter	rest from securities			23,711.		23,71	11.		1000 Carte 1200 1100 1100 1100 1100 1100 1100 110
		Gross rents									WATERSHIP WAS
_		Net rental income or (loss)			* !!	<u> </u>					
R E		Net gain/(loss) from Gross sales price fo	sale of assets not on li	ne 10		DESE.	1 873.11	** *****			
V	_	assets on line 6a			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	KECE	VED	44 0		19 1 数数数 在16 42 数1.7年等数:1.75的	निवारी । इतिकारिका के लागे इन्हें अपन्तिकारिका स्कूतिक
E N	7 8	Net short-term	ome (from Part IV, line : .capital gain	2) ,		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		44,03			Burn Brassan Garage
ΰ	9	Income modific			8		2012] <u> </u>	384×	J, 190.	- 1/4 x 2/2 1 4 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
E	10 a	Gross sales less returns and allowances	Ì		29-31		K013	S	Ŵ.	(株)以(株)、(1948)	Principle of Artificial Control
		allowances Less Cost of				TO VALLE	1 1 12 12 1				
	_	goods sold			<u> </u>	OGDEN	, UT				
		Gross profit/(loss)		ļ			3-111,74		R-2		
	11	`	(attach schedule)			F 000					
<u></u>	12	Total. Add lines	ARITY DISBURSE	MENT		5,000. 428,711.		67,74	7	5,796.	Ministration (Cont.) (A.
-S-			ficers, directors, trustees	s, etc		6,000.		3,00		3,790.	3,000.
2	14	Other employee sal	aries and wages			.,					
•	15	Pension plans,	employee benefit	ts							
> A		Legal fees (attach s									
MAY -=0>			tach sch) L-16b \$			960.			50.	0.	0.
			tach sch) L-16c \$	stmt		3,396.	·	3,39	3 6.	0.	0.
SCAMBIED BC-12210-2	17	Interest	ee instrs) FOREIGN T	AXES			 -		_		
ZR R	18 19	Depreciation (a				4 .	 		4.	0.	0.
€ î		sch) and deple	tion								
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	20	Occupancy	:								
	21		nces, and meetin	gs			1			ļ	
A E N X D P	22 23	Printing and pu	iblications s (attach schedule	"	-		ļ .				
D P	23		YING AGENT			7.			7.	0.	0.
N S	24		and administrat				<u> </u>		•	 	
E S		expenses. Add	l lines 13 through	23.		10,367.		7,36	57.	0.	3,000.
	25	Contributions, gifts				327,150.	¥'.	*{ tony			327,150.
	26	Total expenses Add lines 24 ar	s and disburseme	nts.		227 617		7 3/	: 7		220 150
	27	Subtract line 2				337,517.	1.	_7,36	<i>) .</i>	0.	330,150.
		Excess of reve	nue over expense	es		- All - Bir	-	• , , , , , ,			, , , , , , ,
		and disbursem	ients			91,194	<u> </u>		, · .		, , , , , , , , , , , , , , , , , , ,
			ome (if negative, enter -	٠ ا		- (60,38	<u> 30.</u>	5 506	
DAA 5			e (if negative, enter -0-			,	<u> </u>	<u>.</u> <u>.</u>		5,796.	Form 990-PF (2012)
DAA F	ur Pa	perwork Reauc	tion Act Notice, s	ee INS	uructio	113.			TEE	A0301 12/06/12	101111 330-FF (2012)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

1,060,983.

Par		osses for Tax on Investment		/- X - T - T - T			-
	(a) List and describe 2-story brick warehouse	the kınd(s) of property sold (e g , reals, or common stock, 200 shares MLC	al estate, Company)	(b) How acc P — Purch D — Dona		(C) Date acquired (month, day, year)	(d)Date sold (month, day, year)
1 a	CAPITAL GAIN DISTRI	BUTION	p			Various	12/31/12
t	MCDONALD'S CORP					04/07/10	01/06/12
	MCDONALD'S CORP		p			04/30/10	<u>01/06/12</u>
	MCDONALD'S CORP		p			03/15/10	D1/06/12
	See Columns (a) thru (d)						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale			(h) Gain or (e) plus (f) m	
				0.			4,052.
<u>k</u>				749.			351.
				495.			205.
				132.			68.
	000 0010/11/10 (0) 11/10 (17)			,724.			39,360.
	(i) Fair Market Value as of 12/31/69	ng gain in column (h) and owned by (j) Adjusted basis as of 12/31/69	(k) Excess of column (over column (j), if any	1)		(I) Gains (Column (k ain minus column (k in -0-) o r Losses (fro), but not less
a	0.	0.		0.			4,052.
							351.
			 				205.
							68.
							39,360.
2			enter in Part I, line 7 er -0- in Part I, line 7		2		44,036.
, ,	n Part I, line 8 t V≨ Qualification Under	8, column (c) (see instructions) If (Section 4940(e) for Reduced foundations subject to the section 4940(e) for Reduced foundations subject foundations subject for Reduced foundations subject for Reduced foundations subject for Reduced foundations subject for Reduced foundations for Reduced foundations for Reduced foundations for Reduced for Reduced foundations for Reduced fo	Tax on Net Investmen				5,796.
Was	es,' the foundation does not quali	is part blank ion 4942 tax on the distributable ami fy under section 4940(e). Do not con i each column for each year; see the	nplete this part		ss	Yes	X No
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ts	(colu	(d) Distribution imn (b) divided l	
	2011	376,153.	822	,052.			0.457578
	2010	349,095.		,464.			0.421885
	2009	308,263.	888	,901.			0.346791
	2008	488,679.		,161.			0.350267
	2007	412,186.		,706.			0.230825
2	Total of line 1, column (d)	· · · · · · · · · · · · · · · · · · ·			2		1.807346
3	Average distribution ratio for the number of years the foundation	e 5-year base period — divide the tot has been in existence if less than 5	al on line 2 by 5, or by the years.		3		0.361469
4	•	able-use assets for 2012 from Part)			4		847,337.
5	Multiply line 4 by line 3				5		306,286.
		ame (19) of Port Libra (7h)			6		
6	Enter 1% of net investment inco	ome (170 of Fail I, lille 2/0) .		• • •			604.
7	Add lines 5 and 6				7		306,890.
8	Enter qualifying distributions fro	om Part XII, line 4 nan line 7, check the box in Part VI, l	line 1h, and complete that as	ort using :	8	tay rate. See the	330,150.
		ian line 7, check the box in Fart VI,	iiile ib, and complete that pa	in cusing a	a 170	ian rate. See the	5
	Part VI instructions	<u> </u>	· · · · · · · · · · · · · · · · · · ·				n 990-PF (2012)

'					
	1				
		1451			Page 4
_	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see	instru	uctions	;)	
1	a Exempt operating foundations described in section 4940(d)(2), check here	***********************************	تتأك		2 <u> 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 </u>
	Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)				
	b Domestic foundations that meet the section 4940(e) requirements in Part V,	1			604.
	check here x and enter 1% of Part I, line 27b	3			1.0
	c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)		<u> </u>	<u>- 44 - 1</u>	الألفد معتبعيب
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
_	foundations only Others enter -0-)	2			0.
3	Add lines 1 and 2	3			604.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			604.
6	Credits/Payments·		罗外流	7.47.3	J. + 2
	a 2012 estimated tax pmts and 2011 overpayment credited to 2012 6a 243.	, 14 / PM		Programme Company	
	b Exempt foreign organizations — tax withheld at source 6 b	2.24		asm 1	(A)
	c Tax paid with application for extension of time to file (Form 8868) 6c 377.		3.6		10.7
	d Backup withholding erroneously withheld 6 d	2			
7	Total credits and payments Add lines 6a through 6d .	7			620.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			16.
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax	11			
Pa	rt VII-A Statements Regarding Activities	-			
1:	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Ye	s No
•	participate or intervene in any political campaign?			1 a	Х
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes				
	(see the instructions for definition)?			1 b	х
	If the answer is 'Yes' to 1aor 1b, attach a detailed description of the activities and copies of any materials put	blishe	d [. 678	\$ \$ (A)
	or distributed by the foundation in connection with the activities	,,,,,,,,,,	_		
	c Did the foundation file Form 1120-POL for this year?			1 c	Х
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		ē,	() (C	
	(1) On the foundation \$\\$ (2) On foundation managers \$\\$				<i>2</i> 1
•	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed foundation managers ► \$	on			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	-1
2	If 'Yes.' attach a detailed description of the activities		4	2	X
	,				1.1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	>	1	3	
4	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		H	4a	X
		•	··	4b	X
	b If 'Yes,' has it filed a tax return on Form 990-T for this year?		-	5	X
J	If 'Yes.' attach the statement required by General Instruction T.		<u> </u>	, 	X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		14		
6	· · · · · · · · · · · · · · · · · · ·		-	- 1	
	By language in the governing instrument, or		- Þ		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that co with the state law remain in the governing instrument?	onflict	-	6 x	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		-		
			F	7 X	
0	a Enter the states to which the foundation reports or with which it is registered (see instructions)		- 1	. 1.%	14.5 5

10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses

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Form 990-PF (2012)

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Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G? If 'No,' attach explanation*.

Form 990-PF (2012) FIRST CITIZENS NATL BANK CHARITABLE FDN, INC.	42-1	<u>451615</u>		Page 5
Part VII-A Statements Regarding Activities (continued)				
At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		. 1	11	x
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqual advisory privileges? If 'Yes,' attach statement (see instructions)	fied person		12	x
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address . ► N/A	n applicatio	on? 1	13 X	. [
14 The books are in care of FIRST CITIZENS TRUST COMPANY Telephon	e no. ►	$(641)^{-4}$	22-1	600
Located at ► 2601 4TH STREET SW MASON CITY IA ZIP + 4 ►	5040	1		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year	► 15	5		•
At any time during calendar year 2012, did the foundation have an interest in or a signature or other a bank, securities, or other financial account in a foreign country?	outhority over		Ye	s No
See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the national foreign country. ▶	ame of the			
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		٠ هُر	∵ 🐔 Ye	s No
1 a During the year did the foundation (either directly or indirectly):		_ 8		6
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	X No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	∐Yes [X_No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	x No		
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes	x No		
b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1° -	1 b	
Organizations relying on a current notice regarding disaster assistance check here.	▶ [X, III	, 14 A
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts that were not corrected before the first day of the tax year beginning in 2012?			1 c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012?	Yes	X No		
If 'Yes,' list the years ► 20 , 20 , 20 , 20				
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 all years listed, answer 'No' and attach statement — see instructions).	2(a)(2) (a)(2) to 		2 b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years ▶ 20 , 20 , 20 , 20	here.	,		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No		
b If 'Yes,' did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.)	ed		3 b	
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a	x
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?			4 b	X
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Form 990-PF (2012) FIRST CITIZENS NATI	BANK CHARITABLE	E FDN, INC. 14720 May Be Reg		451615 Page 6
** * * * * * * * * * * * * * * * * * * *		,	(00////////////////////////////////////	1272 No. 1000 (2000 (17.10 200 (4
5 a During the year did the foundation pay or incutal (1) Carry on propaganda, or otherwise attemption	•	n (section 4945(e))?	Yes	No No
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	lic election (see section	4955); or to carry		
(3) Provide a grant to an individual for travel,		purposes? .	Yes	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	ganization described ictions)	. Yes	No
(5) Provide for any purpose other than religio educational purposes, or for the prevention			Yes δ	No
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to one a current notice regard	qualify under the excep ding disaster assistance	tions	5 b
Organizations relying on a current notice rega			▶ [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		Yes	No
If 'Yes,' attach the statement required by Regi		• •		
 6 a Did the foundation, during the year, receive are on a personal benefit contract? b Did the foundation, during the year, pay prem. 		•	Yes	K No 6b x
If 'Yes' to 6b, file Form 8870	and the state of the state of	ny, on a personal bene	me contract:	6b X
7 a At any time during the tax year, was the found	· · · · · · · · · · · · · · · · · · ·			No No
b If 'Yes,' did the foundation receive any procee Part VIII Information About Officers, D				7b
and Contractors	irectors, trustees,	roundation manag	gers, nignly Pald	Employees,
1 List all officers, directors, trustees, foundation		compensation (see inst		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	
PATRICIA A. TOMSON				
PO BOX 1708 MASON CITY IA 50402	EXEC DIRECTOR 2.00	6,000.	0	. 0.
O. JAY TOMSON	DDDGTDDNM			
PO BOX 1708 IA 50402	PRESIDENT 1.00	0.	o	. 0.
GORDON ANDERSON	1.00			•
501 MAIN ST	DIRECTOR			
OSAGE IA 50461	1.00	0.	0	. 0.
See Information about Officers, Directors, Trustees, Etc				
		0.	0	. 0.
2 Compensation of five highest-paid employee	s (other than those inc			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e)Expense account, other allowances
NONE			,	
		- -		
Total number of other employees paid over \$50,000	<u> </u>			>
BAA		2/25/12	.	Form 990-PF (2012)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	<u> </u>
Total number of others receiving over \$50,000 for professional services	None
Rart IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 GRANTS PAID TO NONPROFIT ORGANIZATIONS THAT MEET	
ESTABLSIHED CRITERIA,	
	327,150.
2	
3	
3	
4	
Partix:B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
	0.
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	None
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Form 990-PF (2012)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	330,150.
ı	Program-related investments — total from Part IX-B	1 b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3 a	
ı	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	330,150.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	604.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	329,546.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Form 990-PF (2012)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7		you have made and		41,763.
2 Undistributed income, if any, as of the end of 2012.				
a Enter amount for 2011 only	3 3 3 3 4 4 4	5 5 5 5 5 7 3 T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	40,906.	
b Total for prior years: 20, 20, 20		2. N. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.		
a Excess distributions carryover, if any, to 2012. a From 2007 327.029.				
<u> </u>				
b From 2008 488, 900. c From 2009 308, 407.				
d From 2010 349, 511.				
e From 2011				
f Total of lines 3a through e	1,850,197.			
4 Qualifying distributions for 2012 from Part	1,030,137.			
XII, line 4 > \$ 330,150.				
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior years				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
(Election required — see instructions)				
c Treated as distributions out of corpus	* · · · · · · · · · · · · · · · · · · ·			
(Election required — see instructions)				
d Applied to 2012 distributable amount				41,763.
e Remaining amount distributed out of corpus	288,387.			
5 Excess distributions carryover applied to 2012		HE STATE OF THE ST		
(If an amount appears in column (d), the same amount must be shown in column (a))				
(-),				
6 Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,138,584.			4.
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency				
has been issued, or on which the section 4942(a) tax has been previously assessed			at original forms.	Z.,
	4	_		
d Subtract line 6c from line 6b Taxable amount – see instructions		0		
	· · · · · · · · · · · · · · · · · · ·		- N W	
e Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount — see instructions			40,906.	
			4, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	6, 5 2
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2013 .	A New March 1			0.
7 Amounts treated as distributions out of				33.00
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(see instructions)				The Carting of the State of the
8 Excess distributions carryover from 2007 not		4 . 3		2 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions).	327,029.			\$ \$ a p = 1 , \$ 8 × 8 · 1
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a			* * * * * * * * * * * * * * * * * * * *	
	1,811,555.	~ (~ · · · · · · · · · · · · · · · · ·	*** *** ***	
10 Analysis of line 9.	* * * * *	*******	, , , , , , , , , , , , , , , , , , ,	, ,
a Excess from 2008 488, 900.		. ,	* *	r , .
b Excess from 2009 308, 407. c Excess from 2010 349, 511.	* * *	*	* *	
3.37.511.	* * *	* * - *	*	
3,37333	* * *	* * *	^ * .	, , , , , , , , , , , , , , , , , , , ,
e Excess from 2012 288, 387.	<u> </u>	· ·	* 1	

Part XIV. Private Operating Founda				42-1451615	
1 a If the foundation has received a ruling or	determination lette			_ 	N/A
is effective for 2012, enter the date of the	•			. [7	T
b Check box to indicate whether the founda		erating foundation	· · · · · · · · · · · · · · · · · · ·	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
b 85% of line 2a		-			
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon.					,
a 'Assets' alternative test — enter.					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of				-	
minimum investment return shown in Part X, line 6 for each year listed					_
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the			e foundation had	\$5,000 or more	in
Information Regarding Foundation Mana List any managers of the foundation who close of any tax year (but only if they hav O. JAY TOMSON	have contributed m	nore than 2% of the than \$5,000). (See	e total contributions re e section 507(d)(2))	eceived by the found	lation before the
b List any managers of the foundation who a partnership or other entity) of which the NOT APPLICABLE	own 10% or more of foundation has a 1	of the stock of a co 10% or greater inte	rporation (or an equa rest.	Illy large portion of t	he ownership of
2 Information Regarding Contribution, Gra Check here ☐ If the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d.	makes contributions	s to preselected ch	arıtable organizations		
a The name, address, and telephone number	er or e-mail of the p	person to whom ap	plications should be	addressed:	
PATRICIA A. TOMSON					
FIRST CITIZENS CHARITABLE			OX 1708		
MASON CITY	IA 5040	<u>`</u>	41) 422-1600	1.	
b The form in which applications should be SEE ATTACHED APPLICATION		imation and materi	iais iney snould inclu(J€.	
c Any submission deadlines					
APPLICATIONS ARE REVIEWED	QUARTERLY.				
d Any restrictions or limitations on awards,				nstitutions, or other	factors:
SEE CRITERIA INCLUDED IN	THE APPLICAT	TON FORM AT	IACRED.		

3 Grants and Contributions Paid During the		ure Paymer	ιι Τ	
Recipient	f recipient is an individual, show any relationship to any foundation manager or	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	 '		
a Paid during the year CARING PREGNANCY CENTER				
830 15TH STREET SW	NONE	PUBLIC		
MASON CITY IA 504		1	CARENET CONFERENCE	1,500.
CASA OF NORTH IOWA	"		RETENTION AND	1,000.
220 N WASHINGTON	NONE	PUBLIC	TRAINING OF	
MASON CITY IA 504		1	VOLUNTEERS	1,000.
CEDAR RIVER JEWEL REC & FINE A	RTS			·
PO BOX 82	NONE	PUBLIC		
OSAGE IA 504	61	CHARITY	CAPITAL PROJECT	50,000.
CHARLES MACNIDER MUSEUM				
303 2ND STREET SE	NONE	PUBLIC	REPAIR AND UPDATE	
MASON CITY IA 504	01	CHARITY	FACILITY	1,000.
CITY OF CHARLES CITY		1		
105 MILWAUKEE MALL	NONE	1	RIVERFRONT	
CHARLES CITY IA 506		CHARITY	DEVELOPMENT	10,000.
CLARION PARTNERSHIP FOR GROWTH				
302 SOUTH MAIN STREET	NONE		PURCHASE AND RENOVATE	
CLARION IA 505		CHARITY	CLARION THEATRE	12,500.
COMMUNITY KITCHEN OF NORTH IC				
606 NORTH MONROE	NONE	1	FOOD FOR NEEDY	0.000
MASON CITY IA 504		CHARITY	FAMILIES	2,000.
COMMUNITY KITCHEN OF NORTH IC		DUDI TO		
606 NORTH MONROE MASON CITY IA 504	NONE	PUBLIC	CAPITAL PROJECT	1,000.
COMMUNITY POLICING ADVISORY BOX		Chariii	CAPITAL PRODECT	1,000.
78 SOUTH GEORGIA	NONE	PUBLIC		
MASON CITY IA 504		l	MATIONAL NIGHT OUT	1,000.
See Line 3a statement				_,
				247,150.
Total			► 3a	327,150.
b Approved for future payment				
		}		
			1	
		1		
				<u> </u>
Total .			► 3b	

Program service revenue Business Amount Exclusion Code	nter gross amounts unless otherwise indicated.	Unrelate	ed business income	Excluded	by section 512, 513, or 514	(e)
g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate: a Debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gan or (loss) from special events 0 Gross profit or (loss) from sales of assets other than inventory 10 Other revenue. a b	Program service revenue [*]	Business		Exclu- sion		Related or exempt function income (See instructions.)
g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from special events 9 Net income or (loss) from special events 9 Occopy of the control of the contr	a					
d g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Interest on savings and tem	b					
g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate: a Debt-financed property Not debt-financed property Not debt-financed property Net rental income or (loss) from personal property Net rental income or (loss) from sales of assets other than inventory Net income or (loss) from sales of inventory Other revenue. a b C Subtotal Add columns (b), (d), and (e) Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Substitute No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	С					
f g Fees and contracts from government agencies 2 Membership dues and assessments	d					
Membership dues and assessments Interest on savings and temporary cash investments Interest on savings and temporary cash investments Dividends and interest from securities Not rental income or (loss) from real estate: Debt-financed property Not rental income or (loss) from personal property Other investment income Gross profit or (loss) from sales of inventory Other revenue. Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 13 instructions to verify calculations.) Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	е					
Membership dues and assessments Interest on savings and temporary cash investments Interest on savings and t	f					
Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property b Not debt-financed property Cother investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from sales of inventory Other revenue. Cother revenue.	g Fees and contracts from government agencies					
A Dividends and interest from securities Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property Net rental income or (loss) from personal property Net rental income or (loss) from personal property Net income or (loss) from sales of assets other than inventory Net income or (loss) from sales of inventory Other revenue. a b C d e 2 Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.) art:XVIEB Relationship of Activities to the Accomplishment of Exempt Purposes	2 Membership dues and assessments					
5 Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory 1 Other revenue. a b c d e 2 Subtotal Add columns (b), (d), and (e) a Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) art:XVIEB Relationship of Activities to the Accomplishment of Exempt Purposes	3 Interest on savings and temporary cash investments					
a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory 1 Other revenue. a b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 6 worksheet in line 13 instructions to verify calculations.) art:XVI:B3 Relationship of Activities to the Accomplishment of Exempt Purposes	4 Dividends and interest from securities					
b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory 1 Other revenue. a b c d e 2 Subtotal Add columns (b), (d), and (e) 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 6 eworksheet in line 13 instructions to verify calculations.) art XVI:B: Relationship of Activities to the Accomplishment of Exempt Purposes Inc. No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	5 Net rental income or (loss) from real estate:	* X4 %	7. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	erit i	おおなんといるこのようか!	THE PERSONS
Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Offices profit or (loss) from sales of inventory Other revenue. Subtotal Add columns (b), (d), and (e) Subtotal Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Total. Add line 13 instructions to verify calculations.) Fig. No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	a Debt-financed property					
7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory 1 Other revenue. a b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) art XVI:B: Relationship of Activities to the Accomplishment of Exempt Purposes line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	b Not debt-financed property					
Garn or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue. Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) eworksheet in line 13 instructions to verify calculations.) Texplain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	6 Net rental income or (loss) from personal property					
9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory 1 Other revenue. a b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) art:XVI:B: Relationship of Activities to the Accomplishment of Exempt Purposes ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	7 Other investment income					
Other revenue. Other revenue. Subtotal Add columns (b), (d), and (e) Subtotal Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Strict No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	8 Gain or (loss) from sales of assets other than inventory					
1 Other revenue. a b c d c d c c d c c c c c c c c c c c c	9 Net income or (loss) from special events					
b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 6 worksheet in line 13 instructions to verify calculations.) 23,711. 23,712. 23,711. 23,711. 23,712. 23,713.	O Gross profit or (loss) from sales of inventory					
b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 6 worksheet in line 13 instructions to verify calculations.) 23,711. 23,712. 23,713. 23,715. 24,715. 25,715. 26,715. 27,715. 27,715. 28,715. 28,715. 28,715. 28,715. 29,715. 20,715	1 Other revenue.		星下學者 安全意识是生命	***	·文集为者以及(1947年2月)	14、美麗山香香香香香
c d e 2 Subtotal Add columns (b), (d), and (e) 23,711. 3 Total. Add line 12, columns (b), (d), and (e) 13 23, ee worksheet in line 13 instructions to verify calculations.) art:XVI:B: Relationship of Activities to the Accomplishment of Exempt Purposes ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	a					
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Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 13 23, 711. 24 Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	С					
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 13 23, 711. 23, 711. 23, 711. 23, 711. 23, 712. 23, 713. 24, 713. 25, 713. 26, 713. 27, 713. 28, 713. 28, 713. 29, 713. 21, 713. 22, 713. 23, 713. 23, 713. 23, 713. 24, 713. 25, 713. 26, 713. 27, 713. 27, 713. 28, 713. 28, 713. 29, 713. 21	d					
3 Total. Add line 12, columns (b), (d), and (e)	e					
ee worksheet in line 13 instructions to verify calculations.) art XVI:B: Relationship of Activities to the Accomplishment of Exempt Purposes ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	2 Subtotal Add columns (b), (d), and (e)	*		***	23,711.	
Relationship of Activities to the Accomplishment of Exempt Purposes ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	3 Total. Add line 12, columns (b), (d), and (e) .				13	23,71
Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)	ee worksheet in line 13 instructions to verify calculation	ons.)				
Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	Point XVIII P. Polationship of Activities to the	o Accompli	chment of Evennt	Purno	coc	
Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)	Activities to the	e Accompi	Similant of Example	i dipo	303	
▼ accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)	Line No. Explain below how each activity for which i	ncome is repo	rted in column (e) of Pa	art XVI-A	contributed importantly	to the
	▼ accomplishment of the foundation's exemp	t purposes (ot	her than by providing fu	nds for s	such purposes) (See ins	structions)
						

▼	accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

-	
	5 000 PE (0010

Form 990-PF (2012) FIRST CITIZENS NATL BANK CHARITABLE FDN, INC. 42-1451615 Part, XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

describe relating a Transfer (1) Cas (2) Oth b Other tr (1) Sale (2) Pure (3) Ren (4) Ren (5) Loa (6) Pere c Sharing d If the ar the good	er assets ansactions es of assets to a nechases of assets from tall of facilities, equipmost arranged in a recommendation of facilities, equipmost formance of service of facilities, equipmost to any of the ds. other assets.	of the Code (o cations? Ing foundation to concharitable exerging a noncharitable exerging ment, or other gements In the code of the code	empt organization able exempt organization able exempt organization assets	501(c)(3) orga exempt organiz inization solicitations or paid employ owing schedule foundation If the	ation of ation of ees .	or in section 5	rays show the fa	1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5) 1 b (6) 1 c	X X X X X X X X X X
any trar	nsaction or sharing	arrangement, s	how in column (d) the value of t	ne goods	, other assets,	or services rece	ıved	
(a) Line no.	(b) Amount involved	(c) Name o	of noncharitable exemp	ot organization	(d)	Description of tran	sfers, transactions, a	and sharing arrang	ements
			<u> </u>						
					1				
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describe	oundation directly ded in section 501(c complete the follo) of the Code (o	ated with, or rela ther than section	ted to, one or r 501(c)(3)) or II	nore tax i section	exempt organiz 527?	zations	Yes	X No
(a) Name of organiza	ation	(b) Type	of organization	1	(c) Description of	relationship	
<u>-</u>									
			-						
						· -			
Under	penalties of perjury. I dec	lare that I have exam	ined this return, includi	ng accompanying s	hedules an	d statements, and to	the best of my knowl	edge and belief, it i	is true.
Sign Correct	and complète Déclarati	on of preparer (other)	than taxpayer) is based	5/29 13	of which pre	Executi	ledge	May the IR this return preparer sl (see instru	S discuss with the hown below ctions)?
Sign	ature of officer or trustee			Date' '		I Date		DTIN	res No
	Print/Type preparer's	name	Preparer's s	ignature	11	Date	Check	f PTIN	
Paid	Timothy J.	Schupick,	CPA /	n Sleep		05/24/13	self-employed	P00194	748
Preparer	Firm's name	Schupick	& Associate	s PC			Firm's EIN 42-	-1449513	
Use Only	Firm's address	13 North	Federal						
,		Mason City	y		IA 50	401	Phone no (6	41) 424-5	993
BAA	·.							Form 990-	PF (2012)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No 1545-0047

Name of the organization		Employer identification number
FIRST CITIZENS NATL BANK C	HARITABLE FDN, INC.	42-1451615
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	า
	4947(a)(1) nonexempt charitable trust not t	treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treat	ted as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the	ue General Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10)	organization can check boxes for both the General F	Rule and a Special Rule See instructions
General Rule For an organization filing Form 990, 99 contributor (Complete Parts I and II)	00-EZ, or 990-PF that received, during the year, \$5,00	00 or more (in money or property) from any one
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi) and rece	ing Form 990 or 990-EZ that met the 33-1/3% suppor eived from any one contributor, during the year, a coi Part VIII, line 1h or (ii) Form 990-EZ, line 1. Comple	intribution of the greater of (1) \$5,000 or
For a section 501(c)(7), (8), or (10) org total contributions of more than \$1,000 the prevention of cruelty to children or	panization filing Form 990 or 990-EZ that received fro for use exclusively for religious, charitable, scientific animals. Complete Parts I, II, and III.	om any one contributor, during the year, c, literary, or educational purposes, or
If this box is checked, enter here the to purpose. Do not complete any of the p	panization filing Form 990 or 990-EZ that received fro igious, charitable, etc, purposes, but these contributional ofal contributions that were received during the year arts unless the General Rule applies to this organiza	ions did not total to more than \$1,000 for an <i>exclusively</i> religious, charitable, etc, ation because it received nonexclusively
religious, charitable, etc, contributions	of \$5,000 or more during the year	- \$
Caution: An organization that is not covered by answer 'No' on Part IV, line 2, of its Form 990; of meet the filing requirements of Schedule E	the General Rule and/or the Special Rules does not file Sche or check the box on line H of its Form 990-EZ or on Part I, lir 3 (Form 990, 990-EZ, or 990-PF).	edule B (Form 990, 990-EZ, or 990-PF) but it must ne 2, of its Form 990-PF, to certify that it does not
BAA For Paperwork Reduction Act Notice or 990-PF.	e, see the Instructions for Form 990, 990EZ,	Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Schedule B		990-EZ,	or 990-PF)	(2012)
Name of organi	zation	_		

Schedule	B (Form 990, 990-EZ, or 990-PF) (2012)	Page	1 of 1 of Part 1
Name of org			r identification number
	CITIZENS NATL BANK CHARITABLE FDN, INC.		451615
	Contributors (see instructions). Use duplicate copies of Part I if additional space is nee		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FIRST_CITIZENS_NATIONAL_BANK		Person X
	2601 4TH STREET SW	\$400,000.	Noncash
	MASON_CITYIA_50401		(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (a) thru (d)

(a)	(b)	(c)	(d)
List and describe the kind(s) of property sold	How acquired	Date acquired	Date sold
(e.g., real estate, 2-story brick warehouse; or	P – Purchase	(month,	(month,
common stock, 200 shares MLC Company)	D — Donation	day, year)	day, year)
AT&T INC	P	12/16/11	10/11/12
ABBOTT LABORATORIES	P	12/16/11	07/19/12
ABBOTT LABORATORIES	P	12/16/11	08/08/12
ABBOTT LABORATORIES	P	12/16/11	10/11/12
CINCINNATI FINANCIAL CORP	P	12/16/11	02/07/12
CONSOLIDATED EDISON INC	P	12/16/11	01/06/12
DOMINION RESOURCES INC	P	12/16/11	01/06/12
EXELON CORP	P	07/19/12	12/06/12
KIMBERLY CLARK CORP	P	10/20/11	07/19/12
KIMBERLY CLARK CORP	P	10/20/11	08/08/12
ELI LILLY & CO	P	12/16/11	10/22/12
PHILLIP MORRIS INTL	P	12/16/11	04/16/12
PHILLIP MORRIS INTGL	P	12/16/11	07/19/12
PHILLIPS 66	P	05/27/11	05/04/12
PROCTOR & GAMBLE CO	P	12/16/11	04/16/12
TELEFONCIA SA SPON ADR	P	12/16/11	05/18/12
UNILEVER PLC	<u>P</u>	12/16/11	10/22/12
VENTAS INC	Р	04/16/12	08/08/12
DUKE ENERGY HOLDINGS	P	12/16/11	07/09/12
PHILLIPS 66	Р	05/27/11	05/07/12
BERKSHIRE HATHAWAY	<u>P</u>	05/04/09	12/05/12
FNMA 2.125% BOND	P	08/01/11	08/17/12
FEDERATED ULTRA SHORT BOND FUND	P	09/28/11	02/29/12
FEDERATED ULTRA SHORT BOND FUND	P	09/28/11	04/03/12
FEDERATED ULTRA SHORT BOND FUND	P	09/28/11	06/20/12
FEDERATED ULTRA SHORT BOND FUND	P	09/28/11	07/23/12

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (e) thru (h)

	·		
(e)	(f)	(g)	(h)
Gross sales	Depreciation allowed	Cost or other basis	Gain or (loss)
price	(or allowable)	plus expense of sale	(e) plus (f) minus (g)
1,676.		1,333.	343.
1,641.		1,371.	270.
1,516.		1,261.	255.
1,813.		1,426.	387.
1,555.		1,412.	143.
2,675.		2,694.	-19.
2,058.		2,031.	27.
3,953.		5,222.	-1,269.
1,805.		1,509.	296.
1,910.		1,653.	257.
2,654.		2,071.	583.
786.		683.	103.
3,319.		2,809.	510.
953.		1,037.	-84.
797.		783.	14.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (e) thru (h)

Continued

(e) ross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
2,527.		3,380.	-853.
2,126.		1,865.	261.
1,851.		1,642.	209.
46.		42.	4.
15.		17.	-2.
131,408.		93,792.	37,616.
100,000.		100,000.	0.
15,000.		14,967.	33.
30,000.		29,935.	65.
56,000.		55,817.	183.
5,000.		4,972.	28.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (i) thru (I)

Complete only for asset by the foundation on 12	(I) Gains (column (h)		
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	gain minus column (k), but not less than -0-) or losses (from column (h))
			343.
		<u></u>	270.
			<u> 255.</u>
			387.
			143.
			27.
			1,269.
			296.
			257.
_			583.
			103.
			510.
			-84.
			14.
			-853.
			261.
			209.
· · · · · · · · · · · · · · · · · · ·			4.
			-2.
			37,616.
			<u></u>
			33.
			65.
			<u> 183.</u>
			28.

Form 990-PF, Part IV, Columns (i) thru (l)	Capital Gains	and Losses fo	r Tax on Investment	Income	Continued
Complete only for assorby the foundation on 1		ain in column (l	h) and owned		(l) (column (h)
(i) (j) Fair Market Value Adjuste as of 12/31/69 as of 12		d basis Excess of column (i)		but not le	us column (k), ess than -0-) uses (from umn (h))
Total		<u> </u>			39,360.
Form 990-PF, Page 6, Information about Off			tc.		
(a) Name and add	dress	(b) Title, and average hour per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person X Busir					
300 MAIN ST CHARLES CITY Person X Busin	IA 50616 ness	DIRECTOR 1.00	0.	0.	0.
Person X Busir MARTI RODAMAKER PO BOX 1708	IA 50616 ness		0.	0.	0.

			<u> </u>	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year COMPREHENSIVE SYSTEMS INC 1453 4TH STREET SE MASON CITY IA 50401	NONE	PUBLIC CHARITY	 ELEVATOR REPAIR	Person or Business . X
CONSUMER CREDIT COUNSELING SERVICES OF N 404 SOUTH MONROE MASON CITY IA 50401	NONE	1	CREDIT COUNSELING SERVICES	2,000.
CRISIS INTERVENTION SERVICES 206 3RD STREET NE MASON CITY IA 50401 CUB CADET CHILDHOOD CENTER	NONE		CAPITAL BUILDING PROJECT	Person or Business X 2,000. Person or
1441 GULL STREET LATIMER IA 50452 ELMA AREA WELLNES CENTER INC	NONE	PUBLIC CHARITY	PLAYGROUND RESURFACING	Business X 1,000. Person or
501 BUSTI AVE ELMA IA 50628 FOREST CITY FIRE DEPARTMENT		PUBLIC CHARITY	CAPITAL PROJECT	Business X 1,000. Person or
FOREST CITY IA 50436 FRANCIS LAUER YOUTH SERVICES			CAPITAL PROJECT	Business X 1,000. Person or
MASON CITY IA 50401 FRANCIS LAUER YOUTH SERVICES		CHARITY	CHARACTER COUNTS EDUCATION PROGRAM	Business X 1,000. Person or Business X
MASON CITY IA 50401 FRANKLIN GENERAL HOSPITAL FON 1720 CENTRAL AVENUE EAST	NONE	CHARITY	2012 EXTRAVAGANZA SPONSORSHIP HOSPITAL REMODELING	2,500.
HAMPTON IA 50441 GOOD SHEPHERD HEALTH CENTER 304 3RD STREET NE	NONE	CHARITY	l	6,000. Person or Business . X
MASON CITY IA 50401 GROW ROCKFORD TOGETHER ASSN 114 WEST MAIN AVE	NONE	CHARITY PUBLIC		1,000. Person or Business X
ROCKFORD IA 50468 HABITAT FOR HUMANITY OF NCI 517 1ST STREET NW	NONE	CHARITY PUBLIC		Person or Business X
MASON CITY IA 50401 IOWA COLLEGE FOUNDATION 505 5TH AVE STE 1034	NONE		SCHOLARSHIP	Person or Business X
MANAWHA COMMUNITY POOL INC 220 WEST 6TH STREET WANAWHA TO MANAWHA TO THE STREET	NONE	PUBLIC		Person or Business X
KANAWHA IA 50447 KANAWHA FIREFIGHTERS ASSN 121 NORTH MAIN STREET KANAWHA IA 50447	NONE		IMPROVEMENTS THERMAL IMAGING CAMERS	Person or Business X
IM 30447		CHARITI	CULTURO	т, лоо.

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year KCMR RADIO				Person or
600 1ST STREET NW	NONE		DUDGUAGE	
	NONE		PURCHASE	
MASON CITY IA 50401		CHARITY	EQUIPMENT	3,000.
LUTHER COLLEGE				Person or
700 COLLEGE DRIVE	NONE	PUBLIC		Business X
DECORAH IA 52101		CHARITY	SCHOLARSHIP FUND	60,000.
LUTHERAN SOCIAL SERVICES				Person or
2502 SOUTH JEFFERSON	NONE	PUBLIC		Business X
MASON CITY IA 50401		CHARITY	PROGRAM	2,000.
LUTHERAN SUMMER MUSIC PROGRAM				Person or
122 W FRANKLIN AVE	NONE		MATCHING	Business X
MINNEAPOLIS MN 55404		CHARITY	GIFT	1,000.
MASON CITY FOUNDATION				Person or
318 S PENNSYLVANIA	NONE	PUBLIC		Business X
MASON CITY IA 50401		CHARITY	OPERATING EXPENSES	5,000.
MASON_CITY_FOUNDATION				Person or
318 S PENNSYLVANIA	NONE	1	SPONSOR	Business X
MASON CITY IA 50401		CHARITY	PERFORMANCE	5,000.
MASON CITY YMCA				Person or
1840 S MONROE	NONE	PUBLIC	CADIMAL DUND	Business X
MASON CITY IA 50401		CHARITY	CAPITAL FUND	5,000. Person or
MASON CITY PUBLIC LIBRARY	NONE		CDONCOD	Business X
225 2ND STREET SE	NONE	PUBLIC		1,000.
MASON CITY IA 50401 MERCY MEDICAL CENTER FOUNDATION		CHARITY	LIVE MUSIC	Person or
	NONE	PUBLIC	MATCHING	Business X
1000 4TH STREET SW MASON CITY IA 50401	NOME	CHARITY		1,000.
MESSIAH'S FOOD PANTRY		CHARTIT	GILI	Person or
102 NORTH MAIN ST	NONE	PUBLIC	FOOD FOR NEEDY	Business X
CHARLES CITY IA 50616	1.3.1.	CHARITY	FAMILIES	5,000.
MITCHELL COUNTY HISTORICAL SOCIETY				Person or
808 SAWYER DRIVE, STE 2	NONE	PUBLIC	PUBLISHING COSTS	Business X
OSAGE IA 50461		CHARITY		1,000.
MORA EDUCATION FOUNDATION				Person or
400 EAST MAPLE AVENUE	NONE	PUBLIC		Business X
MORA MN 55051		CHARITY	MATCHING GIFT	1,000.
NEWMAN CATHOLIC SCHOOL FDN				Person or
2445 19TH STREET SW	NONE	PUBLIC		Business X
MASON CITY IA 50401		CHARITY	MATCHING GIFT	1,000.
NEWMAN CATHOLIC SCHOOLS				Person or
2445 19TH STREET SW	NONE	PUBLIC	CAPITAL	Business X
MASON CITY IA 50401		CHARITY	IMPROVEMENTS	25,000.
NORTHERN LIGHTS ALLIANCE FOR HOMELESS		<u> </u>		Person or
2 SOUTH ADAMS	NONE	PUBLIC		Business X
MASON CITY IA 50401		CHARITY	MATCHING GIFT	500.

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year NO IOWA AREA COMM COLLEGE FDN 500 COLLEGE MASON CITY IA 50401 NO IOWA AREA COMM COLLEGE FDN	NONE		PERFORMING ARTS SPONSORSHIP	Person or Business X 3,500. Person or
MASON CITY IA 50401 NORTH IA AREA COUNCIL OF GOVTS	NONE	PUBLIC CHARITY	SCHOLARSHIPS	Business X 3,000. Person or
525 6TH STREET SE MASON CITY IA 50401 NORTH IOWA BAND FESTIVAL	NONE		EMERGENCY HOUSING REPAIRS	Business X 5,500. Person or
9 NORTH FEDERAL MASON CITY IA 50401 NORTH IOWA FAIR ASSOCIATION	NONE	1	SPONSOR PARADE	Business X 5,000. Person or
3700 4TH STREET SW MASON CITY IA 50401 NORTH IOWA VOCATIONAL CENTER	NONE		SPONSORSHIP PROGRAM	Business X 7,500. Person or
1225 S HARRISON IA 50401	NONE	, – – – –	TELECONFERENCE AND TRAINING CENTER	Business X 2,500.
OSAGE COMMUNITY SCHOOLS 820 SAWYER DRIVE OSAGE IA 50461	NONE	PUBLIC CHARITY	COMPUTER PURCHASE	Person or Business X 15,000.
OSAGE FIREFIGHTER ASSN 426 MECHANIC ST IA 50461	NONE .		CAPITAL PROJECT	Person or Business X
PARADISE COMMUNITY THEATER 237 UNION STREET SOUTH MORA MN 55051	NONE	PUBLIC CHARITY		Person or Business X 2,500.
PHEASANTS FOREVER INDUSTRIAL DRIVE FOREST CITY IA 50436	NONE	PUBLIC CHARITY	MATCHING GIFT	Person or Business X 1,000.
ROCKWELL AQUATIC CENTER PO BOX 446 ROCKWELL IA 50469	NONE	PUBLIC CHARITY		Person or Business X 2,000.
ST JOHN'S LUTHERAN CHURCH 200 SOUTH MAIN STREET CHARLES CITY IA 50616	NONE	PUBLIC CHARITY		Person or Business X
SPECIAL KIDS SPECIAL LOVE INC 2137 336TH STREET OSAGE IA 50461	NONE	PUBLIC CHARITY		Person or Business X 2,000.
STEBENS CHILDRENS THEATRE 616 NORTH DELAWARE MASON CITY IA 50401	NONE	PUBLIC CHARITY		Person or Business X
THE CHORAL MUSIC GUILD 1700 4TH STREET SE MASON CITY IA 50401	NONE	PUBLIC		Person or Business X

Continued

Recipient Name and address	If recipient is an individual, show any	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a Paid during the year				
THE HUT YOUTH DEVELOPMENT CENTER				Person or
1110 NORTH GRAND AVE	NONE	PUBLIC		Business X
CHARLES CITY IA 50616		CHARITY	PROGRAMMING	2,500.
THE LEARNING CENTER	NONE			Person or Business X
404 NORTH JACKSON ST CHARLES CITY IA 50616	NONE	PUBLIC	CENEDAL ODEDAMING	Business X 5,000.
CHARLES CITY IA 50616 TRINITY LUTHERAN CHURCH		CHARITY	GENERAL OPERATING	Person or
213 NORTH PENNSYLVANIA	NONE	PUBLIC	HURRICANE SANDY	Business X
MASON CITY IA 50401	<u> </u>	CHARITY		1,000.
UNA VOCIS CHORAL ENSEMBLE		CHARTIT	KBBIBI	Person or
115 10TH STREET NW	NONE NONE	PUBLIC	UNDERWRITE	Business X
MASON CITY IA 50401		CHARITY		1,000.
UNIVERSITY OF IOWA		V	001102111 2112211020	Person or
1 JESSUP HALL	NONE	PUBLIC	ADVANCED PLACEMENT	Business X
IOWA CITY IA 52242		CHARITY		1,000.
THE WORLD FOOD PRIZE FOUNDATION			RESTORATION OF	Person or
1700 RUAN CENTER	NONE	PUBLIC		Business X
DES MOINES IA 50309		CHARITY	PUBLIC LIBRARY	10,000.
YOUTH FOR CHRIST				Person or
2210 SOUTH FEDERAL	NONE	PUBLIC	BASIC FINANCIAL	Business X
MASON CITY IA 50401		CHARITY	EDUCATION PROJECT	5,000.
				Person or
				Business
				-1,000.

Total

247,150.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SCHUPICK & ASSOC, PC	TAX PREPARATION	960.	960.	0.	0.
Total		960.	960.	0.	0.

Form 990-PF, Page 1, Part I Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FIRST CITIZENS TRUST	TRUSTEE	3,396.	3,396.	0.	0.
Total		3,396.	3,396.	0.	0.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End of Year		
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value	
ALTRIA GROUP INC	5,585.	6,319.	
AMERICAN ELEC PWR INC	1,679.	1,878.	
ASTAZENECA PLC	7,003.	7,232.	
AT&T INC	5,042.	5,866.	
BCE INC	6,059.	6,527.	
BERKSHIRE HATHAWAY INC	21,823.	22,425.	
BRISTOL MYERS SQUIBB CO	6,045.	5,768.	
CENTURYLINK INC	6,005.	6,455.	
CHEVRON CORPORATION	1,134.	1,622.	
COCA COLA	1,367.	1,704.	
CONOCO PHILLIPS	6,022.	6,553.	
DOMINION RESOURCES INC	1,676.	1,709.	
DUKE ENERGY HOLDINGS	6,172.	6,189.	
HEALTHCARE REIT INC	2,558.	3,003.	
H J HEINZ CO	6,153.	6,691.	
HCP INC	1,995.	2,303.	
JOHNSON & JOHNSON	4,457.	4,767.	
KIMBERLY CLARK CORP	3,234.	3,799.	
KRAFT FOODS GROUP	5,119.	5,093.	
ELI LILLY & CO	4,184.	5,080.	
LORILLARD INC	1,628.	1,750.	
MCDONALDS CORP	4,224.	4,146.	
MERCK & CO	5,362.	5,691.	
NATIONAL GRID PLC	6,395.	7,640.	
PPL CORP	3,546.	3,521.	
PEPSICO INC	1,557.	1,642.	
PHILLIP MORRIS INTL INC	2,354.	2,593.	
PROCTOR & GAMBLE CO	1,762.	1,833.	
REYNOLDS AMERICAN	5,653.	6,007.	
SOUTHERN CO	6,555.	6,293.	
VERIZON COMMUNICATIONS INC	6,034.	7,010.	
WELLS FARGO & CO	34,192.	37,598.	
WINDSTREAM CORP	1,500.	1,076.	
BANK OF AMERICA PREFERRED	49,784.	62,425.	
GLAXOSMITHKLINE PLC	7,101.	6,825.	
ROYAL DUTCH SHELL PLC	7,558.	7,373.	
TOTAL S. A.	6,817.	7,333.	
UNILEVER PLC	1,511.	1,820.	
VODAFONE GROUP PLC	7,110.	6,474.	

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Continued

		End of Year		
	Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value	
Total		263,955.	290,033	

Form 990-PF, Page 2, Part II, Line 10c

L- 10c Stmt

	End of Year		
Line 10c - Investments - Corporate Bonds:	Book Value	Fair Market Value	
MORGAN STANLEY 3.45% BOND FEDERATED ULTRA SHORT BOND FUND	49,750. 114,303.	52,095. 114,489.	
Total	164,053.	166,584.	

Form 990-PF, Page 2, Part II, Line 13

L-13 Stmt

	End of Year		
Line 13 - Investments - Other:	Book Value	Fair Market Value	
ISHARE MSCI EAFE FUND	62,187.	60,556.	
ISHARE S&P MIDCAP 400 GROWTH	13,319.	24,598.	
ISHARE S&P MIDCAP 400 VALUE	14,084.	24,239.	
ISHARE S&P SMALLCAP 600 BARRA VALUE	13,216.	23,059.	
ISHARE S&P SMALLCAP 600 GROWTH	10,885.	23,111.	
ETF VANGUARD EMERGING MARKETS	39,884.	37,628.	
TWEEDY BROWNE GLOBAL VALUE	46,603.	47,346.	
Total	200,178.	240,537.	

Form 990-PF, Page 2, Part II, Line 15

Other Assets Stmt

	Beginning	End of	Year
Line 15 - Other Assets:	Year Book Value	Book Value	Fair Market Value
EX-DIVIDENDS	0.	1,988.	1,988.
Total	0.	1,988.	1,988.

APPLICATION PROCEDURE FOR THE FIRST CITIZENS NATIONAL BANK CHARITABLE FOUNDATION, INC.

The First Citizens National Bank Charitable Foundation is a corporation established under the Iowa Non-Profit Corporation Act under Chapter 504(A) of the Code of Iowa (1995), and commenced existence on December 27, 1995. The Corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code of 1954.

Criteria for Making Grant Determination

- The Applicant must be a "public charity" within the meaning of Internal Revenue Code Section 501(c)(3) and must submit a copy of IRS letter with Application.
- 2. The Applicant must demonstrate the feasibility of the project for which the funds will be used and submit a proposed budget for the project.
- 3. In addition to the foregoing and other factors, whether an application for a grant is favorably considered, and the amount of the grant, depends upon the total number of applicants, the amount requested by each applicant, and the amount of funds available to the First Citizens National Bank Charitable Foundation.

Submitting Applications

Please submit application to a staff member at any of our bank locations:

Alta Vista: 103 South White Avenue - Alta Vista, IA 50603 300 North Main Street - Charles City, IA 50616 Charles City 120 First Avenue, NW - Clarion, IA 50525 Clarion: 220 North Main Street - Kanawha IA 50447 Kanawha: 119 North Akir Street - Latimer, IA 50452 Latimer. 2601 Fourth Street, SW - Mason City, IA 50401 Mason City. 124 West Main Street - New Hampton, IA 50659 New Hampton:

Osage:

501 Main Street - Osage, IA 50461

Or mail to

Pat Tomson, Executive Director First Citizens National Bank Charitable Foundation P O. Box 1708 Mason City, IA 50402-1708

Application Deadlines

June 1 and November 15

Contents of Applications

Applications will be accepted by submission of the attached Application form delivered to a bank staff member at one of the locations listed above or mailed to the Executive Director. Additional information, including pamphlets or informational documentation, may also be submitted.

FIRST CITIZENS NATIONAL BANK CHARITABLE FOUNDATION, INC. APPLICATION FOR GRANT FUNDING

Date	
Applicant	
Contact Person and Title	
Mailing Address	
Phone	
Applicant's Status:	
City or County	Not for Profit Corporation
Business or Corporation	Committee/Group/Club
Amount Requested \$	Total Project Cost \$
Give a brief description of the mission of your	ur organization

2. Give a brief description of the project for which application is being made, explaining the purpose of this request and specifically what this contribution will be used for.

Comments and signature of bank staff member receiving application:			
	<u>g</u>		
Signature of bank staff member	Date		



CRA Needs Assessment 2012

Organization Name:			
Contact Person:		Phone:	
Date:	E-mail address:		
Give a brief description of the pu	rpose of your organizat	tion:	
How does your organization addingusehold income below \$45,6		and moderate-income individuals	? This would be
Do you have a method of tracking	g the income level? If	so, how? Please be specific.	
What percentage of those served	d meet this criteria? Ho	ow was this determined?	
What do you consider as the prir income housing: services such a development.	mary need(s) of your co s meals, medical care,	ommunity or organization? Exam or mental health; unemployment	ples might be low- or economic
How could First Citizens Nationa	ıl Bank assist your orga	anization in meeting those needs?	Please be specific.
	Signature		