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For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation FIRST CITIZENS CHARITABLE FOUNDATION INC		A Employer identification number 42-1451615	
Number and street (or P.O. box number if mail is not delivered to street address) 2601 4TH STREET SW PO BOX 1708		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code MASON CITY, IA 504021708		B Telephone number (see instructions) (641) 423-1600	
G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 1,377,199	J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	360,000			
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	42,315	42,315		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)		18,491		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	5	5		
	12 Total. Add lines 1 through 11	402,320	60,811		
	13 Compensation of officers, directors, trustees, etc	6,000	3,000		3,000
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	840	840		
	c Other professional fees (attach schedule)	6,169	6,169		
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	691	691		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	24 Total operating and administrative expenses. Add lines 13 through 23	13,700	10,700		3,000
	25 Contributions, gifts, grants paid	364,645			364,645
	26 Total expenses and disbursements. Add lines 24 and 25	378,345	10,700		367,645
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	23,975			
	b Net investment income (if negative, enter -0-)		50,111		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash—non-interest-bearing		9,764	8,135	8,135
	2	Savings and temporary cash investments		31,933	42,557	42,557
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	448,519	481,989	586,786	
	c	Investments—corporate bonds (attach schedule)	147,164	147,164	144,105	
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	519,279	519,280	595,616	
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
15	Other assets (describe ▶ _____)					
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,156,659	1,199,125	1,377,199		
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶ _____)				
	23	Total liabilities (add lines 17 through 22)		0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☐ and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here ☒ and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	1,156,659	1,199,125		
	29	Retained earnings, accumulated income, endowment, or other funds				
30	Total net assets or fund balances (see instructions)	1,156,659	1,199,125			
31	Total liabilities and net assets/fund balances (see instructions) .	1,156,659	1,199,125			

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,156,659
2	Enter amount from Part I, line 27a	2	23,975
3	Other increases not included in line 2 (itemize) ▶ _____	3	18,491
4	Add lines 1, 2, and 3	4	1,199,125
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	1,199,125

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a See Additional Data Table				
b				
c				
d				
e				
(e) Gross 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)	
a See Additional Data Table				
b				
c				
d				
e				
(i) F M V as of 12/31/69			(j) Adjusted basis as of 12/31/69	
(k) Excess of col. (i) over col. (j), if any			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
a See Additional Data Table				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)			2	18,491
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8				3

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))	
2015	401,839	1,318,872		0 304684
2014	335,400	1,309,718		0 256086
2013	404,350	1,122,660		0 360171
2012	329,546	847,337		0 388920
2011	376,153	822,052		0 457578
2 Total of line 1, column (d)			2	1 767439
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3	0 353488
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			4	1,383,419
5 Multiply line 4 by line 3			5	489,022
6 Enter 1% of net investment income (1% of Part I, line 27b)			6	501
7 Add lines 5 and 6			7	489,523
8 Enter qualifying distributions from Part XII, line 4			8	367,645
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions				

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b	1	1,002
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
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	1,002
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	1,002
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	1,122
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	1,122
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	120
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ☐ 120 Refunded ☐	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☐ \$ _____ (2) On foundation managers ☐ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	No
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ _____		
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? <i>If "No," attach explanation</i> .	8b	No
9 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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	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).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	Yes	
14	The books are in care of ► FIRST CITIZENS TRUST COMPANY Telephone no ► (641) 422-1600			

Located at ► 2601 4TH STREET SW MASON CITY IA ZIP+4 ► 50401

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		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country ►			

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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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 ☒ 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 ☒ 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here.			
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 2016?	1c		No
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 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?		☐ Yes ☒ 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(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		☐ Yes ☒ No	
b	If "Yes," did it have excess business holdings in 2016 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 approved 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 2016)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2016?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No			
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No Organizations relying on a current notice regarding disaster assistance check here. ☐ Yes ☒ No	5b		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No <i>If "Yes" to 6b, file Form 8870</i>	6b		No
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No	7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				
Total number of other employees paid over \$50,000. ☐ Yes ☒ No				

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, 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		
Total number of others receiving over \$50,000 for professional services. ►		0

Part 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 ESTABLISHED CRITERIA - SEE LISTING ON PAGE 11, PART XV		364,645
2		0
3		0
4		0

Part IX-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	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	1,337,328
b	Average of monthly cash balances.	1b	67,158
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,404,486
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	1,404,486
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	21,067
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,383,419
6	Minimum investment return. Enter 5% of line 5.	6	69,171

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	69,171
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	1,002
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,002
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	68,169
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	68,169
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	68,169

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	367,645
b	Program-related investments—total from Part IX-B.	1b	
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).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	367,645
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	367,645

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.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				68,169
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			64,861	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2016				
a From 2011.	376,350			
b From 2012.	288,387			
c From 2013.	348,930			
d From 2014.	335,400			
e From 2015.	401,839			
f Total of lines 3a through e.	1,750,906			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 367,645				
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2016 distributable amount.				
e Remaining amount distributed out of corpus	367,645			
5 Excess distributions carryover applied to 2016 (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	2,118,551			
b Prior years' undistributed income Subtract line 4b from line 2b				
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.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions			64,861	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				68,169
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .	376,350			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	1,742,201			
10 Analysis of line 9				
a Excess from 2012.	288,387			
b Excess from 2013.	348,930			
c Excess from 2014.	335,400			
d Excess from 2015.	401,839			
e Excess from 2016.	367,645			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 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	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
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 (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
O JAY TOMSON

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest
NOT APPLICABLE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
PATRICIA A TOMSON
FIRST CITIZENS CHARITABLE FOUNDATIO
MASON CITY, IA 50402
(641) 422-1600

b The form in which applications should be submitted and information and materials they should include
SEE ATTACHED APPLICATION FORMS

c Any submission deadlines
APPLICATIONS ARE REVIEWED QUARTERLY

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
SEE CRITERIA INCLUDED IN THE APPLICATION FORM ATTACHED

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	364,645
b <i>Approved for future payment</i>				
Total			3b	

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2016)

Part XVII

- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees. **1c**
- d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

* * * * *

Title

May the IRS discuss this return with the preparer shown below (see instr)? ☐ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name TIMOTHY J SCHUPICK CPA	Preparer's Signature	Date 2017-05-22	Check if self-employed ☐	PTIN
Firm's name ▶ Schupick & Associates PC				Firm's EIN ▶
Firm's address ▶ 13 North Federal Mason City, IA 50401				Phone no (641) 424-5993

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

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
ALTRIA GROUP INC	P	2011-09-13	2016-07-26
B P AMOCO SPONSORED ADR	P	2013-01-14	2016-02-29
GENERAL MILLS INC	P	2014-11-05	2016-08-05
GLAXOSMITHKLINE PLC SPON ADR	P	2011-12-16	2016-11-21
HCP INC	P	2011-12-16	2016-01-11
JOHNSON & JOHNSON COM	P	2012-09-17	2016-10-18
KRAFT HEINZ CO COM	P	2012-10-11	2016-10-18
MCDONALDS CORP	P	2011-12-16	2016-02-08
MERCK & CO INC COM	P	2012-01-06	2016-11-21
OMEGA HEALTHCARE INVESTORS INC	P	2015-06-09	2016-07-15

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

(e) Gross 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)
4,136	0	2,048	2,088
2,951	0	4,425	-1,474
3,840	0	2,873	967
5,746	0	6,672	-926
6,812	0	7,173	-361
4,104	0	2,290	1,814
13,921	0	8,556	5,365
3,523	0	2,636	887
5,590	0	3,962	1,628
4,236	0	4,495	-259

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
0	0	0	2,088
0	0	0	-1,474
0	0	0	967
0	0	0	-926
0	0	0	-361
0	0	0	1,814
0	0	0	5,365
0	0	0	887
0	0	0	1,628
0	0	0	-259

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

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
PHILLIP MORRIS INTL INC	P	2011-12-16	2016-04-18
PROCTER & GAMBLE CO COM	P	2011-12-16	2016-07-26
REALTY INCOME CORP	P	2013-07-03	2016-08-05
REYNOLDS AMERICAN INC	P	2011-08-24	2016-10-26
ROYAL DUTCH SHELL PLC SPON ADR	P	2011-12-16	2016-01-13
UNILEVER PL AMER ADR	P	2011-12-16	2016-10-18
VENTAS INC	P	2013-09-16	2016-10-18
MUTUAL FUND CAPITAL GAIN DISTRIBUTIONS	P	2015-01-01	2016-12-31

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

(e) Gross 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)
2,602	0	2,139	463
2,889	0	2,601	288
2,127	0	1,297	830
24,397	0	12,214	12,183
6,928	0	12,531	-5,603
3,481	0	3,227	254
1,930	0	1,606	324
23	0	0	23

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
0	0	0	463
0	0	0	288
0	0	0	830
0	0	0	12,183
0	0	0	-5,603
0	0	0	254
0	0	0	324
0	0	0	23

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
PATRICIA A TOMSON	EXEC DIRECTOR 2 00	6,000	0	0
PO BOX 1708 MASON CITY, IA 50402				
O JAY TOMSON	PRESIDENT 1 00	0	0	0
PO BOX 1708 MASON CITY, IA 50402				
GORDON ANDERSON	DIRECTOR 1 00	0	0	0
501 MAIN ST OSAGE, IA 50461				
CATHERINE ROTTINGHAUS	DIRECTOR 1 00	0	0	0
300 MAIN ST CHARLES CITY, IA 50616				
MARTI RODAMAKER	DIRECTOR 1 00	0	0	0
PO BOX 1708 MASON CITY, IA 50402				
KRISTINE SCHULTZ	DIRECTOR 1 00	0	0	0
PO BOX 1708 MASON CITY, IA 50402				
SHAROL MCCOY	SECRETARY 1 00	0	0	0
PO BOX 1708 MASON CITY, IA 50402				
JEFFREY GRIBBEN	TREASURER 1 00	0	0	0
PO BOX 1708 MASON CITY, IA 50402				

Form 990FP Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CASA OF NORTH IOWA 220 N WASHINGTON MASON CITY, IA 50401		PUBLICCHARITY	TRAINING OF RETENTION AND VOLUNTEERS	1,000
COMMUNITY KITCHEN OF NORTH IOWA 606 NORTH MONROE MASON CITY, IA 50401		PUBLICCHARITY	FOOD FOR NEEDY FAMILIES	5,000
COMMUNITY POLICING ADVISORY BOARD 78 SOUTH GEORGIA MASON CITY, IA 50401		PUBLICCHARITY	NATIONAL NIGHT OUT	1,000
COMPREHENSIVE SYSTEMS INC 1453 4TH STREET SE MASON CITY, IA 50401		PUBLICCHARITY	RENOVATIONS	7,840
GOOD SHEPHERD HEALTH CENTER 304 3RD STREET NE MASON CITY, IA 50401		PUBLICCHARITY	TELEPHONE REASSURANCE	1,000
IOWA COLLEGE FOUNDATION 505 5TH AVE STE 1034 DES MOINES, IA 50309		PUBLICCHARITY	SCHOLARSHIP PROGRAM	5,000
LUTHERAN SOCIAL SERVICES 2502 SOUTH JEFFERSON MASON CITY, IA 50401		PUBLICCHARITY	HEALTHY FAMILIES PROGRAM	2,500
MASON CITY YMCA 1840 S MONROE MASON CITY, IA 50401		PUBLICCHARITY	POOL LIFT MATCHING GIFT	4,000
MASON CITY YMCA 1840 S MONROE MASON CITY, IA 50401		PUBLICCHARITY	SCHOLARSHIPS	5,000
MERCY MEDICAL CENTER FOUNDATION 1000 4TH STREET SW MASON CITY, IA 50401		PUBLICCHARITY	MATCHING GIFT	1,000
NORTHERN LIGHTS ALLIANCE FOR HOMELESS 2 SOUTH ADAMS MASON CITY, IA 50401		PUBLICCHARITY	DEBT REDUCTION	50,000
NORTHERN LIGHTS ALLIANCE FOR HOMELESS 2 SOUTH ADAMS MASON CITY, IA 50401		PUBLICCHARITY	MATCHING GIFT	2,000
NO IOWA AREA COMM COLLEGE FDN 500 COLLEGE MASON CITY, IA 50401		PUBLICCHARITY	PERFORMING ARTS SCHOLARSHIP SPONSORSHIP	34,500
NORTH IA AREA COUNCIL OF GOVTS 525 6TH STREET SE MASON CITY, IA 50401		PUBLICCHARITY	EMERGENCY HOUSING REPAIRS	5,000
NORTH IOWA BAND FESTIVAL 9 NORTH FEDERAL MASON CITY, IA 50401		PUBLICCHARITY	SPONSOR PARADE	5,000
Total ► 3a				364,645

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
THE WORLD FOOD PRIZE FOUNDATION 666 GRAND AVENUE PO BOX 1700 DES MOINES, IA 50309		PUBLICCHARITY	SUSTAINABILITYFUND	10,000
YOUTH FOR CHRIST 2210 SOUTH FEDERAL MASON CITY, IA 50401		PUBLICCHARITY	BASIC FINANCIALEDUCATION PROJECT	10,000
THE SALVATION ARMY 747 VILLAGE GREEN DR MASON CITY, IA 50401		PUBLICCHARITY	ACTIVITIESADULT ARTGENERAL FUND	2,000
CHARLES CITY BOOSTER CLUB 1 COMET LANE CHARLES CITY, IA 50616		PUBLICCHARITY	MATCHINGGIFT	1,000
KCMR RADIO 316 N FEDERAL AVE MASON CITY, IA 50401		PUBLICCHARITY	GENERALOPERATING	3,500
NORTH IOWA EVENTS CENTER 3700 4TH ST SW MASON CITY, IA 50401		PUBLICCHARITY	SPONSORSHIP	7,500
CITY OF NORA SPRINGS SWIMMING POOL 605 E CONGRESS ST NORA SPRINGS, IA 50458		EXEMPT	SWIMMINGPOOL	5,000
WINNEBAGO COUNCIL OF BOY SCOUTS 1631 4TH ST SW STE 125A MASON CITY, IA 50401		EXEMPT	YOUTH PROGRAM	5,000
COMMUNITY BANKERS OF IOWA ED FDN 1603 22ND ST STE 102 WEST DES MOINES, IA 50266		PUBLICCHARITY	SCHOLASHIPS	1,000
KANAWHA COMMUNITY POOL 112 E 2ND ST KANAWHA, IA 50447		PUBLICCHARITY	DEBT REDUCTION	5,000
KANAWHA SWIMMING POOL 112 E 2ND ST KANAWHA, IA 50447		PUBLICCHARITY	POOL SKIMMERSPROGRAM	1,500
MACNIDER ART MUSEUM FDN 303 22N ST SE MASON CITY, IA 50401		EXEMPT	EXHIBITS/REMODELING	1,000
GIRL SCOUT CAMP TANGLEFOOT 14948 DOGWOOD AVE CLEAR LAKE, IA 50428		EXEMPT	CRAFT HOUSEREPAIRS	1,000
ELDERBRIDGE AGENCY ON AGING 22 N GEORGIA AVE 216 MASON CITY, IA 50401		EXEMPT	ELDERBIRDGE ENDOW FDCOMM FDN OF NE IACLIENT CHAIRS	5,955
WEST HANCOCK CO AMBULANCE SERV INC 20 1ST AVE SW BRITT, IA 50423		EXEMPT	EMERGENCYEQUIPMENT	1,000
Total			► 3a	364,645

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
MORA AREA YOUTH RECREATION ASSN 701 SOUTH UNION ST MORA, MN 55051		EXEMPT	DEHUMIDIFICATIONSYSTEM	10,000
ISU EXTENSION- CERRO GORDO CO 2023 S FEDERAL AVE MASON CITY, IA 50401		EXEMPT	GREENHOUSE	5,000
IMMACULATE CONCEPTION CHURCH 106 CHAPEL LN CHARLES CITY, IA 50616		EXEMPT	MATCHINGGIFT	1,000
CEDAR VALLEY SEMINARY FDN INC 2365 370TH ST OSAGE, IA 50461		EXEMPT	RENOVATIONS	12,500
HOSPICE OF NORTH IOWA 232 2NS ST SE MASON CITY, IA 50401		EXEMPT	MATCHINGGIFT	250
UNIVERSITY OF NORTHERN IA FDN 204 COMMONS CEDAR FALLS, IA 50614		EXEMPT	MATCHINGGIFT	1,000
ABOVE AND BEYOND CANCER 1915 GRAND AVE DES MOINES, IA 50309		PUBLICCHARITY	MISSION TRIP	4,000
CARING PREGNANCY CENTER 830 15TH ST SW 1 MASON CITY, IA 50401		EXEMPT	TRAINING	2,500
CHARLES CITY EXCELLENCE IN EDUCATION 1 COMET DRIVE CHARLES CITY, IA 50616		EXEMPT	SIGN FORNEW GYM	25,000
CHARLES CITY FOSTER GRANDPARENT PROGRAM 624 N MAIN ST CHARLES CITY, IA 50616		EXEMPT	READING ASSISTANCEPROGRAM	1,000
CHICKASAW CTY PUB HEALTH & HOME 260 E PROSPECT ST NEW HAMPTON, IA 50659		EXEMPT	TRAINING	1,500
CITY OF CLARION 302 S MAIN ST CLARION, IA 50525		EXEMPT	DEFIBRILLATORS	4,500
CONSUMER CREDIT COUSELING SERV OF NI 23 3RD ST NW MASON CITY, IA 50401		EXEMPT	COUNSELINGSESSIONS	5,000
COULTER PUBLIC LIBRARY 111 MAIN ST COULTER, IA 50431		EXEMPT	LED SIGN	1,000
CRISIS INTERVETNION SERVICE 206 3RD ST NE MASON CITY, IA 50401		EXEMPT	DOMESTIC VIOLENCESERVICES	2,500
Total			▶ 3a	364,645

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CUB CADET CHILDHOOD CENTER 1441 GULL AVE LATIMER, IA 50452		EXEMPT	DEBT REDUCTION	5,000
FLOYD COUNTY FAIR SOCIETY PO BOX 301 CHARLES CITY, IA 50616		EXEMPT	YOUTH ENRICHMENTCENTER	20,000
FOREST CITY EDUCATION FDN 145 S CLARK ST FOREST CITY, IA 50436		EXEMPT	MATCHING GIFT	1,000
HEARTLAND MUSEUM 119 9TH ST SW CLARION, IA 50525		EXEMPT	HVAC INSTALLATION	2,500
IMMANUEL UNITED CHURCH OF CHRIST 204 E SOUTH ST LATIMER, IA 50452		EXEMPT	PLAYGROUNDRENOVATION	2,500
LIBERTY SCHOOL MUSEUM 422 E 5TH ST KANAWHA, IA 50447		EXEMPT	PAINT/REPAIRS	1,000
MC CHAMBER OF COMMERCE FDN 9 N FEDERAL AVE MASON CITY, IA 50401		EXEMPT	OPERATIONS	5,000
MASON CITY CSD 1515 S PENNSYLVANIA AVE MASON CITY, IA 50401		EXEMPT	BUDDY BENCH	1,100
MASON CITY EDUCATION FDN 1515 S PENNSYLVANIA AVE MASON CITY, IA 50401		EXEMPT	STRENGTH & CONDITIONCOACH	2,500
MASON CITY HIGH SCHOOL 1700 4TH ST SE MASON CITY, IA 50401		EXEMPT	SCHOLARSHIP	2,500
MC POLICE DEPT 78 S GEORGIA AVE MASON CITY, IA 50401		EXEMPT	FLASHLIGHTUPGRADE	1,500
MEALS ON WHEELS - MC 606 N MONROE AVE MASON CITY, IA 50401		EXEMPT	OPERATIONS	5,000
MITCHELL CTY MEMORIAL FDN 616 N 8TH ST OSAGE, IA 50461		EXEMPT	MATCHING GIFT	1,000
NEWMAN CATHOLIC SCHOOLS 2445 19TH ST SW MASON CITY, IA 50401		EXEMPT	SPONSORSHIP	7,500
NIVC SERVICES INC 1225 S HARRISON AVE MASON CITY, IA 50401		EXEMPT	TRAINING	5,000
Total ► 3a				364,645

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NI DOMESTIC & SEXUAL ABUSE COM PO BOX 656 MASON CITY, IA 50401		EXEMPT	TRAINING	2,000
RIVER CITY SOCIETY FOR HISTORIC PRESER 530 1ST ST NE MASON CITY, IA 50401		EXEMPT	EXHIBIT	1,500
RIVERSIDE LUTHERAN BIBLE CAMP 3001 RIVERSIDE RD STORY CITY, IA 50248		EXEMPT	MATCHING GIFT	1,000
ROCKWELL LIONS CLUB PO BOX 57 ROCKWELL, IA 50469		EXEMPT	DEBT REDUCTION	2,000
SOUP FOR THE SOUL INC 536 S UNION ST MORA, MN 55051		EXEMPT	OPERATIONS	2,500
STACYVILLE COMM NURSING HOME 413 S BROAD ST STACYVILLE, IA 50476		EXEMPT	NETWORKDEVELOPMENT	2,000
THE LEARNING CENTER 404 N JACKSON ST CHARLES CITY, IA 50616		EXEMPT	MATERIALS &EQUIPMENT	3,000
UNA VOCIS CHORAL ENSEMBLE PO BOX 494 MASON CITY, IA 50401		EXEMPT	OPERATIONS	2,500
WELLSOURCE 235 S EISENHOWER AVE MASON CITY, IA 50401		EXEMPT	RENOVATIONS	5,000
WRIGHT CTY HISTORICAL SOCIETY 1275 TAYLOR AVE BELMOND, IA 50421		EXEMPT	RENOVATIONS	12,000
WRIGHT ON THE PARK 17 S FEDERAL AVE MASON CITY, IA 50401		EXEMPT	TEACHERSWORKSHOP	1,000
Total ▶ 3a				364,645

TY 2016 Accounting Fees Schedule**Name:** FIRST CITIZENS CHARITABLE FOUNDATION INC**EIN:** 42-1451615

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SCHUPICK & ASSOC, PC TAX PREPARATION	840	840		

TY 2016 Investments Corporate Bonds Schedule**Name:** FIRST CITIZENS CHARITABLE FOUNDATION INC**EIN:** 42-1451615

Name of Bond	End of Year Book Value	End of Year Fair Market Value
ROYAL BANK OF CANADA	75,000	75,295
VANGUARD HIGH YIELD CORPORATE FUND	72,164	68,810

TY 2016 Investments Corporate Stock Schedule

Name: FIRST CITIZENS CHARITABLE FOUNDATION INC
EIN: 42-1451615

Name of Stock	End of Year Book Value	End of Year Fair Market Value
AT&T INC	16,556	21,052
ABBVIE INC	16,010	16,970
ALTRIA GROUP INC	10,529	18,866
AMERICAN ELEC PWR INC	3,143	4,659
ASTRAZENECA PLC SPON	6,408	5,519
BCE INC	17,666	16,907
BERKSHIRE HATHAWAY INC	21,823	40,745
CHEVRON CORPORATION	7,414	8,357
COCA COLA	11,610	12,065
CONSOLIDATED EDISON INC	4,146	4,568
CROWN CASTLE INTL CORP	10,157	9,631
DOMINION RESOURCES INC	6,300	8,655
DUKE ENERGY HOLDINGS	11,068	12,885
EXXON MOBIL CORP	11,981	14,983
GENERAL MILLS INC	2,972	3,459
JOHNSON & JOHNSON	3,728	5,300
KIMBERLY CLARK CORP	6,236	9,015
KRAFT FOODS GROUP	2,586	4,453
MCDONALDS CORP	15,159	18,015
MERCK & CO	8,682	11,480
NATIONAL GRID PLC	13,258	14,058
NOVARTIS A G	7,904	7,648
OCCIDENTAL PETROLEUM CORP	4,056	3,846
PNC FINANCIAL SVCS CORP	24,975	35,088
PPL CORP	7,298	8,887
PEPSICO INC	2,992	4,394
PHILLIP MORRIS INTL INC	16,681	18,298
PROCTOR & GAMBLE CO	13,347	14,630
REALTY INCOME CORP	2,897	3,851
SANOFI-AVENTIS SPONS ADR	17,478	16,661

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SOUTHERN CO	11,275	12,494
VENTAS INC	4,597	5,189
VERIZON COMMUNICATIONS INC	17,930	20,765
WELLS FARGO & CO	34,193	60,621
WELLTOWER INC	6,280	7,095
BANK OF AMERICA PREFERRED	49,784	64,174
B P AMOCO SPONSORED ADR	10,414	9,196
GLAXOSMITHKLINE PLC	11,705	9,666
TOTAL S A SPONS ADR	2,007	2,090
UNILEVER PLC	5,647	5,698
VODAFONE GROUP PLC	23,097	14,853

TY 2016 Investments - Other Schedule**Name:** FIRST CITIZENS CHARITABLE FOUNDATION INC**EIN:** 42-1451615

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ISHARE S&P MIDCAP 400 GROWTH		54,117	76,524
ISHARE S&P MIDCAP 400 VALUE		54,692	82,770
ISHARE S&P SMALLCAP 600 BARRA VALUE		36,240	62,305
ISHARE S&P SMALLCAP 600 GROWTH		31,087	58,500
ETF VANGUARD EMERGING MARKETS		72,749	58,679
ISHARE MSCI EAFE FUND		106,817	101,605
ISHARE DOW JONES INTL SELECT DIV IDX		103,851	88,680
ISHARES DJ US REAL ESTATE		59,727	66,553

TY 2016 Other Income Schedule

Name: FIRST CITIZENS CHARITABLE FOUNDATION INC

EIN: 42-1451615

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INVESTMENT INCOME	5	5	

TY 2016 Other Increases Schedule

Name: FIRST CITIZENS CHARITABLE FOUNDATION INC

EIN: 42-1451615

Description	Amount
CAPITAL GAIN	18,491

TY 2016 Other Professional Fees Schedule**Name:** FIRST CITIZENS CHARITABLE FOUNDATION INC**EIN:** 42-1451615

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FIRST CITIZENS TRUST CO TRUSTEE	6,169	6,169		

TY 2016 Taxes Schedule**Name:** FIRST CITIZENS CHARITABLE FOUNDATION INC**EIN:** 42-1451615

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	46	46		
FEDERAL EXCISE TAXES	645	645		

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>.	OMB No 1545-0047 2016
	Name of the organization FIRST CITIZENS CHARITABLE FOUNDATION INC	Employer identification number 42-1451615

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
FIRST CITIZENS CHARITABLE FOUNDATION INC

Employer identification number
42-1451615

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FIRST CITIZENS BANK 2601 4TH ST SW MASON CITY, IA 50401	\$ 360,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Employer identification number

42-1451615

Part II	Noncash Property
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(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization FIRST CITIZENS CHARITABLE FOUNDATION INC	Employer identification number 42-1451615
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee