

For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017

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) \$ 1,561,934		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	45,835	45,835		
	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)		40,362		
	8 Net short-term capital gain			2,123	
	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)				
	12 Total. Add lines 1 through 11	405,835	86,197	2,123	
	13 Compensation of officers, directors, trustees, etc	10,000	5,000		5,000
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	875	875		
	c Other professional fees (attach schedule)	6,755	6,755		
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	995	995		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	-5,000			-5,000
	24 Total operating and administrative expenses. Add lines 13 through 23	13,625	13,625		0
	25 Contributions, gifts, grants paid	372,600			372,600
	26 Total expenses and disbursements. Add lines 24 and 25	386,225	13,625		372,600
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	19,610			
	b Net investment income (if negative, enter -0-)		72,572		
	c Adjusted net income (if negative, enter -0-)			2,123	

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	8,135		
	2 Savings and temporary cash investments	42,557	77,523	77,523
	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)	481,989	522,408	677,367
	c Investments—corporate bonds (attach schedule)	147,164	147,164	144,876
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	519,280	512,002	662,168
	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)	1,199,125	1,259,097	1,561,934	
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	1,199,125	1,259,097	
	29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances (see instructions)	1,199,125	1,259,097		
31 Total liabilities and net assets/fund balances (see instructions) .	1,199,125	1,259,097		

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	1,199,125
2 Enter amount from Part I, line 27a	2	19,610
3 Other increases not included in line 2 (itemize) ▶ _____	3	40,362
4 Add lines 1, 2, and 3	4	1,259,097
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	1,259,097

Part IV Capital Gains and Losses for Tax on Investment Income

(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			

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	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	40,362
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	2,123

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))
2016	367,645	1,383,419	0 265751
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
2 Total of line 1, column (d)			2 1 575612
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 315122
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 1,538,886
5 Multiply line 4 by line 3			5 484,937
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 726
7 Add lines 5 and 6			7 485,663
8 Enter qualifying distributions from Part XII, line 4			8 372,600

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	1,451
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	1,451
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	1,451
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	1,040
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	1,040
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	411
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ☐ 0 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 2017 or the taxable year beginning in 2017 (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 2017, 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? 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 ▶	16	Yes	No

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			
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 2017? ☐ 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 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? ☐ 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 2017 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 2017). ☐ Yes ☒ No 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 2017? 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. ☐ 	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. **0**

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	372,600
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	1,483,433
b	Average of monthly cash balances.	1b	78,888
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,562,321
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	1,562,321
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	23,435
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,538,886
6	Minimum investment return. Enter 5% of line 5.	6	76,944

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	76,944
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	1,451
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,451
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	75,493
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	75,493
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	75,493

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	372,600
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	372,600
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	372,600

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 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				75,493
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			68,169	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2017				
a From 2012.	288,387			
b From 2013.	348,930			
c From 2014.	335,400			
d From 2015.	401,839			
e From 2016.	367,645			
f Total of lines 3a through e.	1,742,201			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 372,600				
a Applied to 2016, but not more than line 2a			68,169	
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 2017 distributable amount.				75,493
e Remaining amount distributed out of corpus	228,938			
5 Excess distributions carryover applied to 2017 (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	1,971,139			
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 2016 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				0
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 2012 not applied on line 5 or line 7 (see instructions).	288,387			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	1,682,752			
10 Analysis of line 9				
a Excess from 2013.	348,930			
b Excess from 2014.	335,400			
c Excess from 2015.	401,839			
d Excess from 2016.	367,645			
e Excess from 2017.	228,938			

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 2017, 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) 2017	(b) 2016	(c) 2015	(d) 2014	
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	372,600
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** (2017)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
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.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

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	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2018-05-09	*****
	Signature of officer or trustee	Date	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	Preparer's Signature	Date	Check if self-employed ☐	PTIN
	TIMOTHY J SCHUPICK CPA		2018-05-15		P00194748
	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)
ISHARE S&P MIDCAP400/GROWTH	P	2002-03-18	2017-02-16
ISHARE S&P MIDCAP400/VALUE	P	2002-03-18	2017-02-16
ABBVIE INC	P	2016-01-06	2017-10-31
ALTRIA GROUP INC	P	2011-09-13	2017-03-27
CONSOLIDATED EDISON INC	P	2016-01-08	2017-11-22
CROWN CASTLE INTL CORP	P	2016-05-18	2017-11-20
JOHNSON & JOHNSON	P	2015-07-08	2017-03-27
KIMBERLY CLARK CORP	P	2011-10-20	2017-03-27
KRAFT HEINZ CO COM	P	2012-10-11	2017-02-23
MCDONALDS CORP	P	2015-10-02	2017-08-01

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)
8,559	0	2,639	5,920
14,260	0	4,639	9,621
14,864	0	10,038	4,826
1,736	0	868	868
5,381	0	4,146	1,235
2,125	0	1,746	379
5,448	0	3,390	2,058
1,995	0	1,184	811
4,780	0	2,586	2,194
15,922	0	10,756	5,166

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	5,920
0	0	0	9,621
0	0	0	4,826
0	0	0	868
0	0	0	1,235
0	0	0	379
0	0	0	2,058
0	0	0	811
0	0	0	2,194
0	0	0	5,166

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)
MERCK & CO INC COM	P	2012-01-06	2017-08-01
PHILLIP MORRIS INTL INC	P	2011-12-16	2017-06-15
PROCTER & GAMBLE CO COM	P	2011-12-16	2017-04-11
SANOFI-AVENTIS SPONS ADR	P	2015-01-06	2017-10-26
SOUTHERN CO COM	P	2012-04-23	2017-04-17
UNILEVER PLC AMER ADR	P	2011-12-16	2017-02-23
JOHNSON & JOHNSON	P	2016-05-05	2017-03-27
MCDONALDS CORP	P	2016-11-29	2017-08-10
NOVARTIS	P	2016-10-13	2017-05-23
NATIONAL GRID PLC SPONSORED ADR	P	2017-05-19	2017-05-26

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)
1,914	0	1,336	578
3,227	0	2,335	892
5,856	0	5,063	793
11,356	0	9,927	1,429
5,962	0	5,352	610
6,506	0	5,647	859
380	0	338	42
5,896	0	4,402	1,494
9,868	0	9,290	578
64	0	55	9

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	578
0	0	0	892
0	0	0	793
0	0	0	1,429
0	0	0	610
0	0	0	859
0	0	0	42
0	0	0	1,494
0	0	0	578
0	0	0	9

Form 990FP 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	10,000	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				
MARY NORDENSTROM	DIRECTOR 1 00	0	0	0
PO BOX 1708 MASON CITY, IA 50401				

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>				
COMMUNITY KITCHEN OF NORTH IOWA 606 NORTH MONROE MASON CITY, IA 50401		PUBLICCHARITY	FOOD FOR NEEDYFAMILIES	5,000
COMMUNITY KITCHEN OF NORTH IOWA 606 NORTH MONROE MASON CITY, IA 50401		PUBLICCHARITY	MATCHINGGIFT	250
GOOD SHEPHERD HEALTH CENTER 304 3RD STREET NE MASON CITY, IA 50401		PUBLICCHARITY	TELEPHONEREASSURANCE	1,000
IOWA COLLEGE FOUNDATION 505 5TH AVE STE 1034 DES MOINES, IA 50309		PUBLICCHARITY	SCHOLARSHIPPROGRAM	5,000
LUTHERAN SOCIAL SERVICES 2502 SOUTH JEFFERSON MASON CITY, IA 50401		PUBLICCHARITY	HEALTHY FAMILIESPROGRAM	6,000
Total			3a	372,600

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>				
MASON CITY FAMILY YMCA 1840 S MONROE MASON CITY, IA 50401		PUBLICCHARITY	POOL LIFTMATCHING GIFT	2,750
MASON CITY FAMILY YMCA 1840 S MONROE MASON CITY, IA 50401		PUBLICCHARITY	SCHOLARSHIPS	5,500
MERCY MEDICAL CENTER FOUNDATION 1000 4TH STREET SW MASON CITY, IA 50401		PUBLICCHARITY	MATCHINGGIFT	1,000
NORTHERN LIGHTS ALLIANCE FOR HOMELESS 2 SOUTH ADAMS MASON CITY, IA 50401		PUBLICCHARITY	DEBT REDUCTION	10,000
NORTHERN LIGHTS ALLIANCE FOR HOMELESS 2 SOUTH ADAMS MASON CITY, IA 50401		PUBLICCHARITY	MATCHINGGIFT	2,500
Total ▶ 3a				372,600

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>				
NO IOWA AREA COMM COLLEGE FDN 500 COLLEGE MASON CITY, IA 50401		PUBLICCHARITY	PERFORMING ARTSSCHOLARSHIPSPONSORSHIP	9,500
NO IOWA AREA COMM COLLEGE FDN 500 COLLEGE MASON CITY, IA 50401		EXEMPT	LABORATORIESFACILITY	25,000
NO IOWA AREA COMM COLLEGE 500 COLLEGE MASON CITY, IA 50401		EXEMPT	MATCHING GIFT	1,000
NORTH IA AREA COUNCIL OF GOVTS 525 6TH STREET SE MASON CITY, IA 50401		PUBLICCHARITY	EMERGENCY HOUSINGREPAIRS	10,000
NORTH IOWA BAND FESTIVAL 9 NORTH FEDERAL MASON CITY, IA 50401		PUBLICCHARITY	SPONSORPARADE	5,000
Total ► 3a				372,600

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>				
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	1,000
NORTH IOWA EVENTS CENTER 3700 4TH ST SW MASON CITY, IA 50401		PUBLICCHARITY	HANGING HEATINGUNITS	5,000
CITY OF NORA SPRINGS SWIMMING POOL 605 E CONGRESS ST NORA SPRINGS, IA 50458		EXEMPT	SWIMMINGPOOL	5,000
Total ► 3a				372,600

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>				
KANAWHA COMMUNITY POOL 112 E 2ND ST KANAWHA, IA 50447		PUBLICCHARITY	CHEMICAL BALANCECONTROLLER	1,000
MACNIDER ART MUSEUM FDN 303 22N ST SE MASON CITY, IA 50401		EXEMPT	EXHIBITS/REMODELING	1,000
ELDERBRIDGE AGENCY ON AGING 22 N GEORGIA AVE 216 MASON CITY, IA 50401		EXEMPT	ELDERBIRDGE ENDOW FDCOMM FDN OF NE IACLIENT CHAIRS	5,000
CEDAR VALLEY SEMINARY FDN INC 2365 370TH ST OSAGE, IA 50461		EXEMPT	RENOVATIONS	12,500
UNIVERSITY OF NORTHERN IA 204 COMMONS CEDAR FALLS, IA 50614		EXEMPT	MATCHINGGIFT	1,000
Total ► 3a				372,600

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>				
CARING PREGNANCY CENTER 830 15TH ST SW 1 MASON CITY, IA 50401		EXEMPT	TRAINING	1,000
CHARLES CITY EXCELLENCE IN EDUCATION 1 COMET DRIVE CHARLES CITY, IA 50616		EXEMPT	SIGN FORNEW GYM	25,000
CONSUMER CREDIT COUSELING SERV OF NI 23 3RD ST NW MASON CITY, IA 50401		EXEMPT	COUNSELINGSESSIONS	5,000
FLOYD COUNTY FAIR SOCIETY PO BOX 301 CHARLES CITY, IA 50616		EXEMPT	YOUTH ENRICHMENTCENTER	15,000
MASON CITY CHAMBER OF COMM FDN 9 N FEDERAL AVE MASON CITY, IA 50401		EXEMPT	OPERATIONS	5,000
Total ▶ 3a				372,600

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>				
MASON CITY HIGH SCHOOL 1700 4TH ST SE MASON CITY, IA 50401		EXEMPT	MUSIC BOOSTEREUPHONIUM AND CASE	5,600
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	5,500
NIVC SERVICES INC 1225 S HARRISON AVE MASON CITY, IA 50401		EXEMPT	COMMUNITYCONNECTIONS	5,000
Total ▶ 3a				372,600

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>				
RIVER CITY SOCIETY FOR HISTORIC PRESER 530 1ST ST NE MASON CITY, IA 50401		EXEMPT	EXHIBIT	1,500
ROCKWELL LIONS CLUBPO BOX 57 ROCKWELL, IA 50469		EXEMPT	DEBT REDUCTION	2,000
THE LEARNING CENTER 404 N JACKSON ST CHARLES CITY, IA 50616		EXEMPT	MATERIALS &EQUIPMENT	10,000
WRIGHT CTY HISTORICAL SOCIETY 1275 TAYLOR AVE BELMOND, IA 50421		EXEMPT	RENOVATIONS	12,000
AMERICAN RED CROSS525 1ST ST NE MASON CITY, IA 50401		EXEMPT	EMERGENCY DISASTERSERVICES	2,500
Total ▶ 3a				372,600

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>				
CITY OF LATIMER200 N AKIR ST LATIMER, IA 50452		EXEMPT	SPLASHPAD	5,000
CITY OF NEW HAMPTON 112 EAST SPRING ST NEW HAMPTON, IA 50659		EXEMPT	RECREATIONALTRAIL	5,000
COMM REVITALIZATION OF CHARLES CITY 401 N MAIN ST CHARLES CITY, IA 50616		EXEMPT	HOLIDAY STREETDECORATIONS	2,500
IOWA SPECIALTY HOSPITAL 403 1ST STREET SE BELMOND, IA 50421		EXEMPT	NEONATALMONITOR	2,500
LUTHERAN MUSIC PROGRAM 121 HENNEPIN AVE MINNEAPOLIS, MN 55401		EXEMPT	MATCHING GIFT	1,000
Total ▶ 3a				372,600

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>				
MASON CITY DOWNTOWN ASSN 9 N FEDERAL AVE MASON CITY, IA 50401		EXEMPT	SPONSORSHIP	3,000
PARADISE AREA COMM THEATER 321 CENTRAL AVE N FARIBAULT, MN 55021		EXEMPT	RENOVATIONS	5,000
PIONEER MUSEUM AND HIST SOC 9184 265TH ST CLEAR LAKE, IA 50428		EXEMPT	RENOVATIONS	2,500
PRAIRIE RIDGE INTEGRATED BEHAVIOR HEALTH 320 N EISENHOWER AVE MASON CITY, IA 50401		EXEMPT	BUILDING ADDITION	15,000
SOCIETY TO PRESERVE ANTIQUATED TOWN STRUCTURE 23 3RD ST NW STE 200 MASON CITY, IA 50401		EXEMPT	HVAC UNIT	1,000
Total ► 3a				372,600

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>				
STEBENS CHILDREN'S THEATRE 616 N DELAWARE AVE MASON CITY, IA 50401		EXEMPT	OPERATIONS	2,500
THE BRIDGE CHURCH913 S MAIN ST CHARLES CITY, IA 50616		EXEMPT	MATCHING GIFT	1,000
THE MASON CITY FOUNDATION 308 S PENNSYLVANIA AVE MASON CITY, IA 50401		EXEMPT	SCHOLARSHIPS	10,000
UNITED WAY OF NC IA2911 4TH ST SE MASON CITY, IA 50401		EXEMPT	SUCCESSLINK	10,000
YOUTH&SHELTER SERVICES INC & FRANCIS LAUER 50 N EISENHOWER AVE MASON CITY, IA 50401		EXEMPT	RECOVERYCENTER	40,000
Total ▶ 3a				372,600

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>				
KCMR RADIO316 N FEDERAL MASON CITY, IA 50401		EXEMPT	PRODUCTION STUDIO	3,500
PHEASANTS FOREVER WINNEBAGO COUNTY FOREST CITY, IA 50436		EXEMPT	MATCHING GIFT	1,000
CHICKASAW TOWNSHIP FIRE DEPT 301 W MAIN STREET IOONIA, IA 50645		EXEMPT	NEW FIRE STATION	10,000
MESSIAH'S FOOD PANTRY102 N MAIN CHARLES CITY, IA 50616		EXEMPT	FOOD FOR POVERTYLEVEL INDIVIDUALS	10,000
Total ► 3a				372,600

TY 2017 Accounting Fees Schedule**Name:** FIRST CITIZENS CHARITABLE FOUNDATION INC**EIN:** 42-1451615**Accounting Fees Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SCHUPICK & ASSOC, PC TAX PREPARATION	875			

TY 2017 Investments Corporate Bonds Schedule**Name:** FIRST CITIZENS CHARITABLE FOUNDATION INC**EIN:** 42-1451615**Investments Corporate Bonds Schedule**

Name of Bond	End of Year Book Value	End of Year Fair Market Value
ROYAL BANK OF CANADA	75,000	75,003
VANGUARD HIGH YIELD CORPORATE FUND	72,164	69,873

TY 2017 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	20,390	23,406
ABBVIE INC	7,724	12,572
ALTRIA GROUP INC	12,285	21,208
AMERICAN ELEC PWR INC	3,143	5,444
ASTRAZENECA PLC SPON	12,920	14,505
BCE INC	18,230	19,348
BERKSHIRE HATHAWAY INC	21,823	49,555
BRITISH AMER TOBACCO	5,604	5,694
CDN IMPERIAL BK	8,661	9,644
CHEVRON CORPORATION	15,113	17,652
COCA COLA	16,391	18,444
CROWN CASTLE INTL CORP	12,037	14,542
DOMINION RESOURCES INC	13,255	16,698
DUKE ENERGY HOLDINGS	11,585	14,467
EXXON MOBIL CORP	14,797	16,812
GENERAL MILLS INC	8,488	9,190
KIMBERLY CLARK CORP	5,052	7,722
MERCK & CO	7,346	9,285
NATIONAL GRID PLC	13,773	13,467
OCCIDENTAL PETROLEUM CORP	13,240	14,437
PNC FINANCIAL SVCS CORP	24,975	43,287
PPL CORP	8,718	9,223
PEPSICO INC	3,349	5,396
PHILLIP MORRIS INTL INC	14,699	18,489
PROCTOR & GAMBLE CO	8,562	10,199
PUBLIC SERVICE ENTERPRISE	5,463	6,334
PUBLIC STORAGE	8,296	8,360
REALTY INCOME CORP	3,070	3,991
SANOFI-AVENTIS SPONS ADR	7,551	7,654
SOUTHERN CO	6,068	6,588

Name of Stock	End of Year Book Value	End of Year Fair Market Value
UNITED PARCEL SERVICE	4,236	4,528
VENTAS INC	6,947	7,261
VERIZON COMMUNICATIONS INC	21,619	24,983
WELLS FARGO & CO	34,193	66,737
WELLTOWER INC	6,496	6,951
BANK OF AMERICA PREFERRED	49,784	72,600
B P AMOCO SPONSORED ADR	11,856	12,021
GLAXOSMITHKLINE PLC	17,408	13,762
TOTAL S A SPONS ADR	11,688	12,549
VODAFONE GROUP PLC	25,573	22,362

TY 2017 Investments - Other Schedule**Name:** FIRST CITIZENS CHARITABLE FOUNDATION INC**EIN:** 42-1451615**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ISHARE S&P MIDCAP 400 GROWTH		51,478	80,936
ISHARE S&P MIDCAP 400 VALUE		50,054	76,052
ISHARE S&P SMALLCAP 600 BARRA VALUE		36,239	68,339
ISHARE S&P SMALLCAP 600 GROWTH		31,087	66,359
ETF VANGUARD EMERGING MARKETS		72,749	75,292
ISHARE MSCI EAFE FUND		106,817	123,746
ISHARE DOW JONES INTL SELECT DIV IDX		103,851	101,370
ISHARES DJ US REAL ESTATE		59,727	70,074

TY 2017 Other Expenses Schedule**Name:** FIRST CITIZENS CHARITABLE FOUNDATION INC**EIN:** 42-1451615**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RETURN OF CONTRIBUTION	-5,000			-5,000

TY 2017 Other Increases Schedule

Name: FIRST CITIZENS CHARITABLE FOUNDATION INC

EIN: 42-1451615

Description	Amount
CAPITAL GAIN	40,362

TY 2017 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	6,755			

TY 2017 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	75	75		
FEDERAL EXCISE TAXES	920	920		

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491135001088	
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 2017	
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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't 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** (See instructions) Use duplicate copies of Part II if additional space is needed

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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	