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Form **990-PF** | OMB No. 1545-0052

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to *www.irs.gov/Form990PF* for instructions and the latest information.

2019

Open to Public Inspection

For calendar year 2019, or tax year beginning 01-01-2019 , and ending 12-31-2019

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	**B** Telephone number (see instructions) (641) 423-1600
City or town, state or province, country, and ZIP or foreign postal code MASON CITY, IA 504021708	**C** If exemption application is pending, check here ▶ ☐
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*) ▶$ 1,606,121 — **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	55,384	55,384		
	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)		44,745		
	8	Net short-term capital gain			0	
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)	0			
	11	Other income (attach schedule)	0			
	12	**Total.** Add lines 1 through 11	415,384	100,129	0	
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc.	10,000	5,000	0	5,000
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)	0			
	b	Accounting fees (attach schedule)	930	930	0	0
	c	Other professional fees (attach schedule)	8,688	8,688	0	0
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	1,196	1,196	0	0
	19	Depreciation (attach schedule) and depletion	0			
	20	Occupancy				
	21	Travel, conferences, and meetings	1,210	0	0	0
	22	Printing and publications				
	23	Other expenses (attach schedule)	0			
	24	**Total operating and administrative expenses.** Add lines 13 through 23	22,024	15,814	0	5,000
	25	Contributions, gifts, grants paid	437,740			437,740
	26	**Total expenses and disbursements.** Add lines 24 and 25	459,764	15,814	0	442,740
	27	Subtract line 26 from line 12:				
	a	**Excess of revenue over expenses and disbursements**	-44,380			
	b	**Net investment income** (if negative, enter -0-)		84,315		
	c	**Adjusted net income** (if negative, enter -0-)			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 (a) Book Value	End of year (b) Book Value	End of year (c) Fair Market Value
Assets 1	Cash—non-interest-bearing	0	348	348
2	Savings and temporary cash investments	103,886	379,451	379,451
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)		0	
7	Other notes and loans receivable (attach schedule) ▶			
	Less: allowance for doubtful accounts ▶		0	
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)	562,379	331,619	427,470
c	Investments—corporate bonds (attach schedule)	147,164	72,164	70,345
11	Investments—land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶		0	
12	Investments—mortgage loans			
13	Investments—other (attach schedule)	540,476	570,976	728,507
14	Land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶		0	
15	Other assets (describe ▶)	0	0	0
16	**Total assets** (to be completed by all filers—see the instructions. Also, see page 1, item I)	1,353,905	1,354,558	1,606,121
Liabilities 17	Accounts payable and accrued expenses			
18	Grants payable			
19	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons		0	
21	Mortgages and other notes payable (attach schedule)		0	
22	Other liabilities (describe ▶)	0	0	
23	**Total liabilities**(add lines 17 through 22)		0	
Net Assets or Fund Balances	**Foundations that follow FASB ASC 958, check here ▶ ☐ and complete lines 24, 25, 29 and 30.**			
24	Net assets without donor restrictions			
25	Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☑ and complete lines 26 through 30.			
26	Capital stock, trust principal, or current funds			
27	Paid-in or capital surplus, or land, bldg., and equipment fund	1,353,905	1,354,558	
28	Retained earnings, accumulated income, endowment, or other funds			
29	**Total net assets or fund balances** (see instructions)	1,353,905	1,354,558	
30	**Total liabilities and net assets/fund balances** (see instructions)	1,353,905	1,354,558	

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 29 (must agree with end-of-year figure reported on prior year's return)	1	1,353,905
2	Enter amount from Part I, line 27a	2	-44,380
3	Other increases not included in line 2 (itemize) ▶	3	45,033
4	Add lines 1, 2, and 3	4	1,354,558
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 29	6	1,354,558

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

	(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) { If gain, also enter in Part I, line 7; If (loss), enter -0- in Part I, line 7 } — **2** 44,745

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** -960

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))
2018	490,637	1,519,510	0.322892
2017	372,600	1,538,886	0.242123
2016	367,645	1,383,419	0.265751
2015	401,839	1,318,872	0.304684
2014	335,400	1,309,718	0.256086

2 Total of line 1, column (d)	2	1.391536
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.278307
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	1,579,911
5 Multiply line 4 by line 3	5	439,700
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	843
7 Add lines 5 and 6	7	440,543
8 Enter qualifying distributions from Part XII, line 4 , ...	8	442,740

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	843
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	843
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	**Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0-	5	843
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019 — 6a: 882		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 0		
d	Backup withholding erroneously withheld — 6d:		
7	Total credits and payments. Add lines 6a through 6d	7	882
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	39
11	Enter the amount of line 10 to be: **Credited to 2020 estimated tax** ▶ 39 **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)	1b		No
	*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.*			
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? *If "Yes," attach a detailed description of the activities.*	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? *If "Yes," attach a conformed copy of the changes*	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? *If "Yes," attach the statement required by General Instruction T.*	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? *If "Yes," complete Part II, col. (c), and Part XV.*	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? *If "No," attach explanation*	8b	Yes	
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 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*	10		No

Part VII-A Statements Regarding Activities (continued)

			Yes	No
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?	13	Yes	

Website address ▶N/A

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

			Yes	No
16	At any time during calendar year 2019, 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		No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. 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. | Yes | No

1a During the year did the foundation (either directly or indirectly):

(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

			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 2019?.	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 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019?. ☐ Yes ☑ No
If "Yes," list the years ▶ 20____ , 20____ , 20____ , 20____

			Yes	No
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

			Yes	No
b	If "Yes," did it have excess business holdings in 2019 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 2019.)*	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 2019?	4b		No

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

			Yes	No
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 . . .	5b		
	Organizations relying on a current notice regarding disaster assistance check here. . . . ▶ ☐			
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			
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
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? . . .	6b		No
	If "Yes" to 6b, file Form 8870.			
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? . . .	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment during the year? . . . ☐ Yes ☐ No			

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	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, 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	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
NONE				

Total number of other employees paid over $50,000. . . . ▶ 0

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 ESTABLSIHED CRITERIA. SEE LISTING ON PAGE 11, PART XV.	437,740
2	
3	
4	

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 NONE	0
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 . . . . ▶	0

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**	1,383,492
b	Average of monthly cash balances.	**1b**	220,479
c	Fair market value of all other assets (see instructions).	**1c**	0
d	**Total** (add lines 1a, b, and c).	**1d**	1,603,971
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). **1e** 0		
2	Acquisition indebtedness applicable to line 1 assets.	**2**	
3	Subtract line 2 from line 1d.	**3**	1,603,971
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	**4**	24,060
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3. Enter here and on Part V, line 4	**5**	1,579,911
6	**Minimum investment return.** Enter 5% of line 5.	**6**	78,996

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**	78,996
2a	Tax on investment income for 2019 from Part VI, line 5. **2a** 843		
b	Income tax for 2019. (This does not include the tax from Part VI.). **2b**		
c	Add lines 2a and 2b.	**2c**	843
3	Distributable amount before adjustments. Subtract line 2c from line 1.	**3**	78,153
4	Recoveries of amounts treated as qualifying distributions.	**4**	
5	Add lines 3 and 4.	**5**	78,153
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**	78,153

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**	442,740
b	Program-related investments—total from Part IX-B.	**1b**	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	**2**	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	**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**	442,740
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**	843
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4.	**6**	441,897

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 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7					78,153
2 Undistributed income, if any, as of the end of 2019:					
a Enter amount for 2018 only.					
b Total for prior years: 20___ , 20___ , 20___					
3 Excess distributions carryover, if any, to 2019:					
a From 2014.	335,400				
b From 2015.	401,839				
c From 2016.	367,645				
d From 2017.	228,938				
e From 2018.	416,387				
f Total of lines 3a through e.		1,750,209			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ $ 442,740					
a Applied to 2018, 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).		0			
d Applied to 2019 distributable amount.					78,153
e Remaining amount distributed out of corpus		364,587			
5 Excess distributions carryover applied to 2019. *(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		2,114,796			
b Prior years' undistributed income. Subtract line 4b from line 2b			0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.					
d Subtract line 6c from line 6b. Taxable amount —see instructions			0		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions				0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020					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 2014 not applied on line 5 or line 7 (see instructions) . . .		335,400			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a		1,779,396			
10 Analysis of line 9:					
a Excess from 2015. . . .	401,839				
b Excess from 2016. . . .	367,645				
c Excess from 2017. . . .	228,938				
d Excess from 2018. . . .	416,387				
e Excess from 2019. . . .	364,587				

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 2019, 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)

	Tax year	Prior 3 years			(e) Total
	(a) 2019	**(b)** 2018	**(c)** 2017	**(d)** 2016	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
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 foundation 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).)

NONE

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. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

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 FORM.

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 Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . ▶ **3a**				437,740
b *Approved for future payment*				
Total . . . . ▶ **3b**				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities.			14	55,384	
5 Net rental income or (loss) from real estate:					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events:					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e).				55,384	

13 Total. Add line 12, columns (b), (d), and (e). 13 55,384

(See worksheet in line 13 instructions to verify calculations.)

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

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

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
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) (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.

******	2020-10-14	******
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		2020-10-26		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

(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.)
AT&T INC	P	2011-12-16	2019-12-06
ABBVIE INC	P	2016-01-06	2019-12-06
ALTRIA GROUP	P	2011-09-13	2019-01-07
ALTRIA GROUP	P	2011-09-13	2019-01-07
ALTRIA GROUP	P	2011-09-13	2019-01-28
ALTRIA GROUP	P	2011-09-13	2019-09-13
ALTRIA GROUP	P	2011-09-13	2019-12-06
AMERICAN ELEC PWR	P	2012-05-18	2019-03-01
AMERICAN ELEC PWR	P	2012-05-18	2019-06-24
AMERICAN ELEC PWR	P	2012-05-18	2019-06-27

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)
12,765	0	11,337	1,428
11,958	0	11,112	846
1,567	0	1,416	151
1,474	0	1,327	147
2,127	0	2,079	48
4,399	0	5,443	-1,044
3,889	0	4,030	-141
1,937	0	1,078	859
2,721	0	1,348	1,373
2,377	0	1,213	1,164

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	1,428
0	0	0	846
0	0	0	151
0	0	0	147
0	0	0	48
0	0	0	-1,044
0	0	0	-141
0	0	0	859
0	0	0	1,373
0	0	0	1,164

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

(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.)
ASTRAZENECA PLC SPON	P	2016-07-21	2019-01-07
ASTRAZENECA PLC SPON	P	2016-07-21	2019-01-10
BCE INC COM NEW	P	2013-12-16	2019-12-06
B P AMOCO SPONSORED ADI	P	2013-01-14	2019-12-06
BRITISH AMERICAN TOBACCO	P	2017-11-16	2019-07-01
BRITISH AMERICAN TOBACCO	P	2017-11-16	2019-07-23
BRITISH AMERICAN TOBACCO	P	2017-11-16	2019-07-26
BRITISH AMERICAN TOBACCO	P	2017-11-16	2019-12-06
CDN IMPERIAL BK COMM TOP	P	2017-07-13	2019-12-06
CHEVRON CORPORATION	P	2015-01-06	2019-12-06

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)
2,669	0	2,137	532
2,474	0	2,013	461
8,923	0	8,433	490
9,516	0	10,376	-860
2,326	0	3,090	-764
1,826	0	2,281	-455
1,872	0	2,377	-505
3,534	0	4,268	-734
9,714	0	9,931	-217
1,662	0	1,518	144

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	532
0	0	0	461
0	0	0	490
0	0	0	-860
0	0	0	-764
0	0	0	-455
0	0	0	-505
0	0	0	-734
0	0	0	-217
0	0	0	144

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

(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.)
CHEVRON CORPORATION	P	2013-01-31	2019-12-06
CHEVRON CORPORATION	P	2014-12-11	2019-12-06
CHEVRON CORPORATION	P	2016-05-05	2019-12-06
CHEVRON CORPORATION	P	2010-01-22	2019-12-06
CHEVRON CORPORATION	P	2015-07-08	2019-12-06
CHEVRON CORPORATION	P	2014-04-29	2019-12-06
CHEVRON CORPORATION	P	2017-03-22	2019-12-06
COCA COLA COMMON STOCK	P	2010-07-28	2019-01-07
COCA COLA COMMON STOCK	P	2010-07-28	2019-01-28
COCA COLA COMMON STOCK	P	2010-07-28	2019-09-13

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)
1,187	0	1,161	26
2,374	0	2,095	279
356	0	307	49
1,424	0	907	517
356	0	281	75
1,068	0	1,142	-74
831	0	755	76
2,110	0	1,844	266
2,492	0	2,172	320
2,109	0	1,721	388

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	26
0	0	0	279
0	0	0	49
0	0	0	517
0	0	0	75
0	0	0	-74
0	0	0	76
0	0	0	266
0	0	0	320
0	0	0	388

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

(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.)
COCA COLA COMMON STOCK	P	2010-07-28	2019-12-06
COCA COLA COMMON STOCK	P	2010-07-28	2019-10-10
CROWN CASTLE INTERNATIONAL	P	2016-05-18	2019-03-21
CROWN CASTLE INTERNATIONAL	P	2016-05-18	2019-04-23
CROWN CASTLE INTERNATIONAL	P	2016-05-18	2019-05-29
CROWN CASTLE INTERNATIONAL	P	2016-05-18	2019-06-24
CROWN CASTLE INTERNATIONAL	P	2016-05-18	2019-06-27
CROWN CASTLE INTERNATIONAL	P	2016-05-18	2019-07-11
CROWN CASTLE INTERNATIONAL	P	2016-05-18	2019-07-16
CROWN CASTLE INTERNATIONAL	P	2016-05-18	2019-08-27

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)
9,025	0	7,336	1,689
1,182	0	972	210
2,282	0	1,747	535
2,226	0	1,747	479
2,382	0	1,844	538
2,298	0	1,655	643
2,359	0	1,753	606
2,280	0	1,744	536
2,388	0	1,847	541
2,206	0	1,539	667

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	1,689
0	0	0	210
0	0	0	535
0	0	0	479
0	0	0	538
0	0	0	643
0	0	0	606
0	0	0	536
0	0	0	541
0	0	0	667

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

(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.)
CROWN CASTLE INTERNATIONAL	P	2016-05-18	2019-09-18
CROWN CASTLE INTERNATIONAL	P	2016-05-18	2019-09-27
DOMINION ENERGY	P	2011-12-16	2019-09-06
DOMINION ENERGY	P	2011-12-16	2019-12-06
DUKE ENERGY HLDG	P	2013-01-31	2019-12-06
DUKE ENERGY HLDG	P	2012-09-17	2019-12-06
DUKE ENERGY HLDG	P	2012-10-22	2019-12-06
DUKE ENERGY HLDG	P	2011-12-16	2019-12-06
DUKE ENERGY HLDG	P	2012-04-23	2019-12-06
EXXON MOBILE CORP	P	2015-08-26	2019-12-06

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)
2,380	0	1,744	636
2,091	0	1,539	552
2,139	0	1,834	305
9,112	0	7,353	1,759
1,880	0	1,436	444
268	0	192	76
1,343	0	979	364
5,642	0	3,987	1,655
89	0	62	27
10,359	0	10,661	-302

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	636
0	0	0	552
0	0	0	305
0	0	0	1,759
0	0	0	444
0	0	0	76
0	0	0	364
0	0	0	1,655
0	0	0	27
0	0	0	-302

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

(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.)
GENERAL MILLS	P	2014-12-11	2019-12-06
GENERAL MILLS	P	2014-11-05	2019-04-23
GENERAL MILLS	P	2015-07-08	2019-05-29
GENERAL MILLS	P	2017-06-06	2019-05-29
GENERAL MILLS	P	2017-06-12	2019-05-29
GENERAL MILLS	P	2014-12-11	2019-05-29
GENERAL MILLS	P	2015-10-02	2019-05-29
GENERAL MILLS	P	2017-09-15	2019-07-11
GENERAL MILLS	P	2017-06-12	2019-07-11
GENERAL MILLS	P	2018-03-01	2019-07-16

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)
1,591	0	1,627	-36
616	0	638	-22
143	0	171	-28
1,004	0	1,210	-206
47	0	57	-10
334	0	367	-33
143	0	167	-24
479	0	499	-20
1,813	0	1,946	-133
105	0	101	4

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	-36
0	0	0	-22
0	0	0	-28
0	0	0	-206
0	0	0	-10
0	0	0	-33
0	0	0	-24
0	0	0	-20
0	0	0	-133
0	0	0	4

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

(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.)
GENERAL MILLS	P	2017-09-15	2019-07-16
GENERAL MILLS	P	2017-10-17	2019-07-16
GLAXOSMIHKLINE PLC SPC	P	2011-12-16	2019-12-06
HUNTINGTON BANCSHARES	P	2018-11-14	2019-12-06
KIMBERLY CLARK CORP	P	2011-10-20	2019-07-16
KIMBERLY CLARK CORP	P	2011-10-20	2019-07-23
KIMBERLY CLARK CORP	P	2011-10-20	2019-09-06
KIMBERLY CLARK CORP	P	2011-10-20	2019-12-06
NATIONAL GRID PLC	P	2017-05-19	2019-12-06
OCCIDENTAL PETROLEUM	P	2016-10-24	2019-12-06

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)
634	0	665	-31
1,163	0	1,136	27
9,770	0	9,655	115
6,343	0	5,684	659
2,217	0	1,512	705
2,297	0	1,607	690
4,552	0	3,120	1,432
2,758	0	1,891	867
7,348	0	7,574	-226
3,569	0	5,971	-2,402

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	-31
0	0	0	27
0	0	0	115
0	0	0	659
0	0	0	705
0	0	0	690
0	0	0	1,432
0	0	0	867
0	0	0	-226
0	0	0	-2,402

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

(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.)
PNC FINANCIAL SERVICES	P	2018-11-13	2019-12-06
PPL CORP	P	2011-12-16	2019-12-06
PEPSICO	P	2011-12-16	2019-10-03
PEPSICO	P	2011-12-16	2019-10-07
PEPSICO	P	2011-12-16	2019-12-06
PEPSICO	P	2011-12-16	2019-12-10
PHILLIP MORRIS INTL	P	2011-12-16	2019-08-27
PHILLIP MORRIS INTL	P	2011-12-16	2019-12-06
PROCTOR & GAMBLE CO	P	2011-12-16	2019-03-01
PROCTOR & GAMBLE CO	P	2011-12-16	2019-04-23

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)
5,394	0	4,764	630
7,501	0	6,468	1,033
2,222	0	1,605	617
2,370	0	1,706	664
5,486	0	4,014	1,472
1,092	0	802	290
4,021	0	4,606	-585
9,673	0	9,542	131
2,249	0	1,839	410
2,058	0	1,599	459

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	630
0	0	0	1,033
0	0	0	617
0	0	0	664
0	0	0	1,472
0	0	0	290
0	0	0	-585
0	0	0	131
0	0	0	410
0	0	0	459

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

(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.)
PROCTOR & GAMBLE CO	P	2011-12-16	2019-05-29
PROCTOR & GAMBLE CO	P	2011-12-16	2019-07-23
PROCTOR & GAMBLE CO	P	2011-12-16	2019-07-26
PROCTOR & GAMBLE CO	P	2011-12-16	2019-08-01
PROCTOR & GAMBLE CO	P	2011-12-16	2019-08-05
REALTY INCOME CORP	P	2013-07-03	2019-12-06
SOUTHERN CO	P	2013-01-31	2019-12-06
SOUTHERN CO	P	2013-01-31	2019-08-30
SOUTHERN CO	P	2017-08-17	2019-12-06
SOUTHERN CO	P	2018-01-17	2019-12-06

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)
2,592	0	1,999	593
1,713	0	1,219	494
1,936	0	1,381	555
2,616	0	1,788	828
2,182	0	1,544	638
2,972	0	1,680	1,292
2,085	0	1,580	505
2,316	0	1,756	560
188	0	145	43
3,196	0	2,303	893

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	593
0	0	0	494
0	0	0	555
0	0	0	828
0	0	0	638
0	0	0	1,292
0	0	0	505
0	0	0	560
0	0	0	43
0	0	0	893

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

(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.)
SOUTHERN CO	P	2016-05-05	2019-12-06
SOUTHERN CO	P	2013-12-23	2019-12-06
SOUTHERN CO	P	2014-10-13	2019-12-06
SOUTHERN CO	P	2015-10-02	2019-12-06
SOUTHERN CO	P	2013-08-08	2019-12-06
SOUTHERN CO	P	2014-04-02	2019-12-06
SOUTHERN CO	P	2013-01-31	2019-12-06
SOUTHERN CO	P	2015-07-08	2019-12-06
SOUTHERN CO	P	2016-10-11	2019-12-06
SOUTHERN CO	P	2015-03-31	2019-12-06

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)
188	0	153	35
188	0	123	65
188	0	138	50
376	0	265	111
188	0	132	56
376	0	260	116
1,566	0	1,097	469
188	0	133	55
188	0	148	40
188	0	133	55

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	35
0	0	0	65
0	0	0	50
0	0	0	111
0	0	0	56
0	0	0	116
0	0	0	469
0	0	0	55
0	0	0	40
0	0	0	55

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

(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.)
SOUTHERN CO	P	2018-01-30	2019-12-10
SOUTHERN CO	P	2018-01-17	2019-12-10
TOTAL S A SPONS ADR	P	2016-10-24	2019-09-27
TOTAL S A SPONS ADR	P	2016-10-24	2019-10-03
UNITED PARCEL SERVICE	P	2017-07-13	2019-10-03
UNITED PARCEL SERVICE	P	2017-07-13	2019-11-18
UNITED PARCEL SERVICE	P	2017-07-13	2019-11-22
UNITED PARCEL SERVICE	P	2017-07-13	2019-12-06
VENTAS INC	P	2013-09-16	2019-10-07
VENTAS INC	P	2013-09-16	2019-12-06

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)
1,083	0	800	283
60	0	45	15
4,709	0	4,947	-238
6,279	0	6,904	-625
2,210	0	2,080	130
2,333	0	2,080	253
2,519	0	2,299	220
4,351	0	4,050	301
2,230	0	1,731	499
4,679	0	4,674	5

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	283
0	0	0	15
0	0	0	-238
0	0	0	-625
0	0	0	130
0	0	0	253
0	0	0	220
0	0	0	301
0	0	0	499
0	0	0	5

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

(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.)
VERIZON COMM	P	2013-01-31	2019-01-10
VERIZON COMM	P	2013-12-23	2019-01-10
VERIZON COMM	P	2013-08-08	2019-01-10
VERIZON COMM	P	2014-02-24	2019-01-10
VERIZON COMM	P	2014-02-24	2019-01-28
VERIZON COMM	P	2014-07-16	2019-12-06
VERIZON COMM	P	2016-05-05	2019-12-06
VERIZON COMM	P	2015-07-08	2019-12-06
VERIZON COMM	P	2015-03-31	2019-12-06
VERIZON COMM	P	2016-11-16	2019-12-06

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)
1,378	0	1,051	327
172	0	146	26
172	0	149	23
401	0	338	63
2,035	0	1,786	249
1,587	0	1,324	263
366	0	305	61
366	0	280	86
183	0	147	36
1,342	0	1,046	296

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	327
0	0	0	26
0	0	0	23
0	0	0	63
0	0	0	249
0	0	0	263
0	0	0	61
0	0	0	86
0	0	0	36
0	0	0	296

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

(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.)
VERIZON COMM	P	2014-04-02	2019-12-06
VERIZON COMM	P	2016-01-06	2019-12-06
VERIZON COMM	P	2016-10-11	2019-12-06
VERIZON COMM	P	2014-10-13	2019-12-06
VERIZON COMM	P	2015-10-02	2019-12-06
VERIZON COMM	P	2014-02-24	2019-12-06
VODAFONE GROUP	P	2011-12-16	2019-03-01
VODAFONE GROUP	P	2011-12-16	2019-03-21
VODAFONE GROUP	P	2011-12-16	2019-12-06
WELLTOWER INC	P	2011-12-16	2019-12-06

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)
183	0	144	39
2,380	0	1,788	592
183	0	149	34
732	0	585	147
183	0	127	56
3,296	0	2,598	698
2,205	0	4,232	-2,027
2,270	0	4,029	-1,759
4,497	0	6,815	-2,318
5,823	0	4,213	1,610

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	39
0	0	0	592
0	0	0	34
0	0	0	147
0	0	0	56
0	0	0	698
0	0	0	-2,027
0	0	0	-1,759
0	0	0	-2,318
0	0	0	1,610

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

(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.)
INVESCO LTD	P	2018-06-18	2019-12-06
AMGEN INC	P	2019-10-03	2019-12-06
CISCO SYSTEMS INC	P	2019-11-18	2019-12-06
ENBRIDGE INC COM	P	2019-04-23	2019-12-06
GENERAL MILLS INC	P	2019-02-04	2019-07-16
GENERAL MILLS INC	P	2018-08-06	2019-07-16
GENERAL MILLS INC	P	2018-12-26	2019-07-16
GILEAD SCINECES INC	P	2019-07-23	2019-12-06
KRAFT HEINZ CO COM	P	2018-05-04	2019-02-22
PRFIZER INC COMMON STOCK	P	2019-06-24	2019-12-06

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)
2,414	0	3,422	-1,008
3,033	0	2,551	482
1,182	0	1,216	-34
4,782	0	4,526	256
105	0	87	18
158	0	142	16
158	0	112	46
7,432	0	7,198	234
3,837	0	5,970	-2,133
9,860	0	10,464	-604

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	-1,008
0	0	0	482
0	0	0	-34
0	0	0	256
0	0	0	18
0	0	0	16
0	0	0	46
0	0	0	234
0	0	0	-2,133
0	0	0	-604

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

(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.)
REGIONS FINL CORP	P	2019-04-23	2019-12-06
ROYAL DUTCH SHELL PLC	P	2019-09-27	2019-12-06
TC ENERGY CROP COM	P	2019-08-27	2019-12-06
AMCOR PLC ORD	P	2019-06-24	2019-12-06
LYONDELLBASELL INDUSTRIES	P	2019-09-06	2019-12-06
ROYAL BANK OF CANADA	P	2014-03-24	2019-03-15
WELLS FARGO & CO	P	2008-10-28	2019-04-12
CAPITAL GAIN DISTRIBUTION	P	2019-12-31	2019-12-31

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)
2,823	0	2,462	361
2,353	0	2,441	-88
2,386	0	2,354	32
2,249	0	2,388	-139
3,896	0	3,535	361
75,000	0	75,000	0
50,854	0	34,193	16,661
232	0	0	232

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	361
0	0	0	-88
0	0	0	32
0	0	0	-139
0	0	0	361
0	0	0	0
0	0	0	16,661
0	0	0	232

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
PATRICIA A TOMSON PO BOX 1708 MASON CITY, IA 50402	EXEC DIRECTOR 2.00	10,000	0	0
O JAY TOMSON PO BOX 1708 MASON CITY, IA 50402	PRESIDENT 1.00	0	0	0
GORDON ANDERSON 501 MAIN ST OSAGE, IA 50461	DIRECTOR 1.00	0	0	0
CATHERINE ROTTINGHAUS 300 MAIN ST CHARLES CITY, IA 50616	DIRECTOR 1.00	0	0	0
MARTI RODAMAKER PO BOX 1708 MASON CITY, IA 50402	VICE PRESIDENT 1.00	0	0	0
MARY NORDENSTROM PO BOX 1708 MASON CITY, IA 50402	DIRECTOR 1.00	0	0	0
ELAINE ABERG PO BOX 1708 MASON CITY, IA 50402	SECRETARY 1.00	0	0	0
JAMES ANDERSON PO BOX 1708 MASON CITY, IA 50402	TREASURER 1.00	0	0	0

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BELMOND AREA ARTS COUNCIL 1179 TAYLOR AVE BELMOND, IA 50421		EXEMPT	CONSTRUCTION OFCANOPY FORARTS CENTER	1,000
BIG BROTHERSSISTERS OF NE IA 101 S Main ST CHARLES CITY, IA 50616		EXEMPT	MENTORING PROGRAM	5,000
BUILD A BETTER BELMOND 1233 HEGINGER DR BELMOND, IA 50421		EXEMPT	CONCRETE PAVINGFOR CHILD ACTIVITY/RECREATION AREA	5,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CENTRAL GARDENS OF NORTH IA 800 2ND AVE N CLEAR LAKE, IA 50428		EXEMPT	UPGRADE2020 PROJECT	2,500
CHARLES CITY COMMUNITY SCHOOLS 500 NORTH GRAND AVE CHARLES CITY, IA 50616		EXEMPT	CONSTRUCTION OF SOFTBALL& BASEBALL FIELD	10,000
CITY OF FLOYD617 MONROE ST FLOYD, IA 50435		EXEMPT	ACCESS TO CEDAR RIVERIN FLOYD	1,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CITY OF MASON CITY10 1ST ST NW MASON CITY, IA 50401		EXEMPT	HIGH LINETRAIL IMPROVEMENTS	5,000
CLEAR LAKE AREA CHAMBER 205 MAIN AVE CLEAR LAKE, IA 50428		EXEMPT	2019 THURSDAY'SON MAINSPONSORSHIP	2,500
CLEAR LAKE PUBLIC LIBRARY 200 N 4TH ST CLEAR LAKE, IA 50428		EXEMPT	HANDICAP-ACCESSIBLEDOORS FOR CHILDREN'SDEPARTMENT	1,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
COMM HEALTH CENTER OF FORT DODGE INC 126 N 10TH ST FORT DODGE, IA 50501		EXEMPT	BLOOD PRESSUREMONITORS	2,650
COMMUNITY HEALTH CENTER OF FORT DODGE INC 126 N 10TH ST FORT DODGE, IA 50501		EXEMPT	SPOT VISIONSCREENER	7,500
COMMUNITY POLICING ADVISORY BOARD 78 S GEORGIA AVE MASON CITY, IA 50401		EXEMPT	"NATIONAL NIGHT OUT"EVENT	1,500
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
COMMUNITY KITCHEN OF NORTH IOWA 606 NORTH MONROE MASON CITY, IA 50401		PUBLICCHARITY	MATCHINGGIFT	250
COMPREHENSIVE SYSTEMS INC 1316 18TH ST SW MASON CITY, IA 50401		EXEMPT	PAL LIFTS	5,000
ELDERBRIDGE AGENCY ON AGING 22 N GEORGIA AVE 216 MASON CITY, IA 50401		EXEMPT	MATERIAL AID FUNDS	5,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ELDERBRIDGE AGENCY ON AGING 22 N GEORGIA AVE 216 MASON CITY, IA 50401		EXEMPT	AUTOMATIC DOORS& FURNISHING OF RECEPTION AREA	5,000
EPIPHANY PARISH SOCIAL JUSTICE COMMITTEE 302 5TH ST SE MASON CITY, IA 50401		EXEMPT	MASON CITY DRUGTREATMENT COURT	1,000
FLOYD COUNTY SHERIFF'S OFFICE 101 S MAIN ST STE 501 CHARLES CITY, IA 50616		EXEMPT	MATCHING GIFT	1,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FOSSIL & PRAIRIE CENTER FDN 1227 215TH ST ROCKFORD, IA 50468		PUBLICCHARITY	MAPLE SYRUPPRODUCTION	1,000
GOOD SHEPHERD HEALTH CENTER 304 3RD STREET NE MASON CITY, IA 50401		PUBLICCHARITY	TELEPHONEREASSURANCE	1,000
GREATER IOWA YOUTH FOR CHRIST 2210 S FEDERAL AVE MASON CITY, IA 50401		EXEMPT	FISCAL LITERACYPROGRAM	10,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
IOOF HOME AND COMMUNITY THERAPY CENTER 1037 19TH ST SW MASON CITY, IA 50401		EXEMPT	MATCHING GIFT	1,000
IOOF HOME AND COMMUNITY THERAPY CENTER 1037 19TH ST SW MASON CITY, IA 50401		EXEMPT	WHELL-CHAIRACCESSIBLE TRANSPORTATIONVEHICLE	5,000
IOWA COLLEGE FOUNDATION 505 5TH AVE STE 1034 DES MOINES, IA 50309		PUBLICCHARITY	SCHOLARSHIPPROGRAM	5,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
IOWA LEGAL AID 202 1ST ST SE SUITE 112 MASON CITY, IA 50401		EXEMPT	TECHNOLOGY FOR LEGALSERVICES FOR LOW-INCOMECLIENTS	5,000
JORDAN RIVER INC DBA MESSIAH FOOD PANTRY 705 3RD AVE CHARLES CITY, IA 50616		EXEMPT	FOOD FOR POVERTY-LEVELINDIVIDUALS	5,000
JUNIOR ACHIEVEMENT OF EASTERN IA 324 3RD ST SE CEDAR RAPIDS, IA 52401		EXEMPT	JUNIR ACHIEVEMENTPROGRAMS	2,500
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
KANABEC HISTORICAL SOCIETY 805 FOREST AVE W MORA, MN 55051		EXEMPT	KANABEC COUNTYHISTORICAL WORK	5,000
KANAWHA SWIMMING POOL 220 W 6TH ST KANAWHA, IA 50447		EXEMPT	POOL HEATER& REPAIRS	4,000
KINNEY PIONEER MUSEUM SUITE G 9184 265TH ST CLEAR LAKE, IA 50428		EXEMPT	REPAIRS TO ROOFSOF TWO MUSEUM BUILDINGS	2,500
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
LAWLER LIONS302 E GROVE ST LAWLER, IA 52154		EXEMPT	REPLACE SHELTER& ADD RESTROOMS TOCROELL PARK	1,000
LIME CREEK NATURE CENTER 3501 LIME CREEK RD MASON CITY, IA 50401		EXEMPT	EXHIBIT RENOVATIONPROJECT	5,000
LUTHERAN ISLAND CAMP INC 45011 230TH ST HENNING, MN 56551		EXEMPT	EQUINE THERAPYPROGRAM	15,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
LUTHERAN SERVICES IN IOWA 2502 SOUTH JEFFERSON MASON CITY, IA 50401		PUBLICCHARITY	FAMILIES TOGETHERPROGRAM	5,000
MASON CITY CHAMBER OF COMMERCE 9 N FEDERAL AVE MASON CITY, IA 50401		EXEMPT	2019 BAND FESTIVALDRUM MAJORSPONSOR	5,000
MASON CITY FAMILY YMCA 1840 S MONROE MASON CITY, IA 50401		PUBLICCHARITY	MATCHING GIFT	1,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MASON CITY FAMILY YMCA 1840 S MONROE MASON CITY, IA 50401		PUBLICCHARITY	MATCHING GIFT	750
MASON CITY FIRE DEPT350 5TH ST SW MASON CITY, IA 50401		EXEMPT	THERMAL IMAGINGCAMERA	5,000
MAYRA701 SOUTH UNION ST MORA, MN 55051		EXEMPT	LED LIGHTS FOR MORACIVIC CENTER	1,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MERCY MEDICAL CENTER FOUNDATION 1000 4TH STREET SW MASON CITY, IA 50401		PUBLICCHARITY	MATCHINGGIFT	1,000
MERCY MEDICAL CENTER FOUNDATION 1000 4TH ST SW MASON CITY, IA 50401		PUBLICCHARITY	MATCHING GIFT	1,000
MISSION 61 INC122 N BUCHANAN ST CAMBRIDGE, MN 55008		EXEMPT	ESTABLISH HOUSING WITHSERVICES FACILITY	17,500
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MITCHELL COUNTRY MEMORIAL FDN 616 N 8TH ST OSAGE, IA 50461		EXEMPT	MATCHINGGIFT	1,000
MITCHELL COUNTY MEMORIAL FDN 616 N 8TH ST OSAGE, IA 50461		EXEMPT	EXPANSION/RENOVATIONOF MITCHELL COUNTYREGIONAL HEALTH CENTER	25,000
MOHAWK MARKET122 S ADAMS AVE MASON CITY, IA 50402		EXEMPT	SCHOOL FOODPANTRY	2,640
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NORTHERN LIGHTS ALLIANCE FOR THE HOMELESS SOUTH ADAMS MASON CITY, IA 50401		PUBLICCHARITY	MATCHINGGIFT	1,000
NORTHERN LIGHTS ALLIANCE FOR HOMELESS 2 SOUTH ADAMS MASON CITY, IA 50401		PUBLICCHARITY	SHELTER FOR HOMELESS& PERMANENT SUPPORTIVEHOUSING	10,000
NORTHERN LIGHTS ALLIANCE FOR HOMELESS 2 SOUTH ADAMS MASON CITY, IA 50401		PUBLICCHARITY	SHELTER OPERATINGEXPENSES	10,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NIACOG HOUSING TRUST FUND 525 6TH ST SW MASON CITY, IA 50401		PUBLICCHARITY	HOMEREPAIR PROGRAM	5,000
NO IOWA AREA COMM COLLEGE FDN 500 COLLEGE DR MASON CITY, IA 50401		PUBLICCHARITY	LIFE LONG LEARNERSPONSORSHIP	10,000
NO IOWA AREA COMM COLLEGE FDN 500 COLLEGE MASON CITY, IA 50401		PUBLICCHARITY	SCHOLARSHIPSPERFORMING ARTSSPONSORSHIP	3,950
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NO IOWA AREA COMM COLLEGE FDN 500 COLLEGE MASON CITY, IA 50401		EXEMPT	$1000SCHOLARSHIPS	3,000
NORTH IOWA AREA COMM COLLEGE FDN 500 COLLEGE DR MASON CITY, IA 50401		EXEMPT	MATCHING GIFT	1,000
NO IOWA AREA COMM COLLEGE 500 COLLEGE MASON CITY, IA 50401		EXEMPT	LAB EQUIPMENT FORPHYSICS PROGRAM	5,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NORTH IOWA CHRISTIAN SCHOOL 680 6TH ST SE MASON CITY, IA 50461		EXEMPT	ADDITION OFGYM/LOCKER ROOMS	12,500
NORTH IA FAIR ASSOCIATION 3700 4TH ST SW MASON CITY, IA 50401		EXEMPT	ANNUAL CERRO GORDOCOUNTY FAIR	10,000
NE IOWA FOOD BANK 1605 LAFAYETTE ST WATERLOO, IA 50703		EXEMPT	BACKPACKPROGRAM	10,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ONE HEARTLAND 2101 HENNEPIN AVE S MINNEAPOLIS, MN 55405		PUBLICCHARITY	CAMP NORTHSTARPROGRAM	5,000
OSAGE COMMUNITY DAYCARE 915 PINE ST OSAGE, IA 50461		EXEMPT	CONSTRUCTION OFNEW DAYCARE	15,000
OUR DAILY BREAD FOOD PANTRY 201 9TH ST NE ALTOONA, IA 50009		EXEMPT	MATCHING GIFT	1,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
PARADISE COMMUNITY THEATRE 237 S UNION ST MORA, IA 55051		EXEMPT	PARKING LOTREPAIRS	2,500
PHEASANTS FOREVER805 PENN BLVD OSKALOOSA, IA 52577		EXEMPT	MATCHING GIFT	1,000
PRAIRIE RIDGE INTEGRATED BEHAVIOR HEALTHCARE 320 N EISENHOWER AVE MASON CITY, IA 50401		EXEMPT	ADDIION FOR WOMEN'S PROGRAM	15,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
PROJECT FLO ASSOCIATION PO BOX 604 SHELL ROCK, IA 50670		EXEMPT	REPAIRING/SHINGLING/RENOVATINGFAMILY RESIDENCES	2,000
POST 733 SAN JUAN-MARNE VFW 1603 S MONROE AVE MASON CITY, IA 50401		EXEMPT	WALK-INCOOLER	2,000
POST 733 SAN JUAN-MARNE VFW 1603 S MONROE AVE MASON CITY, IA 50401		EXEMPT	EXIT DOORS AND REFURBISHINGOF FRONT DOORS ATALL VETS CENTER	1,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ROCKWELL LIONS CLUBPO BOX 57 ROCKWELL, IA 50469		PUBLICCHARITY	DEBT REDUCTION-ROCKWELL AQUATICCENTER BATH HOUSE	2,000
THE WORLD FOOD PRIZE FOUNDATION 666 GRAND AVENUE PO BOX 1700 DES MOINES, IA 50309		PUBLICCHARITY	SUSTAINABILITYFUND	10,000
THE SALVATION ARMY 747 VILLAGE GREEN DR MASON CITY, IA 50401		PUBLICCHARITY	MATCHING GIFT	1,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SALVATION ARMY ADULT DAY HEALTH CENTER 747 VILLAGE GREEN DR MASON CITY, IA 50401		PUBLICCHARITY	HANDS-ON ARTACTIVITIES	1,000
SALVATION ARMY OF NORTH IA 747 VILLAGE GREEN DR MASON CITY, IA 50401		EXEMPT	OPERATING EXPENSESFOR ADULT DAY HEALTHCENTER	5,000
SPIN DEVO4700 4TH ST SW MASON CITY, IA 50401		EXEMPT	YOUTH CYCLING DEVELOPMENTAND WOMENS CYCLING	2,500
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
STACYVILLE KIDS CARE 603 N BROAD ST STACYVILLE, IA 50476		EXEMPT	CHILDREN'S PLAYCENTERS	1,000
VASALOPPET INC100 S UNION ST MORA, MN 55051		EXEMPT	CONSTRUCT STORAGEFOR SNOW-MAKINGEQUIPMENT	7,500
WEST HANCOCK COMM SCHOOL DISTRICT 420 9TH AVE SW BRITT, IA 50423		EXEMPT	OUTSIDE DIGITAL SCOREBOARDAND SIGNAGE	5,000
Total . . . . ▶ **3a**				437,740

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
YSS FOUNDATION50 N EISENHOWER MASON CITY, IA 50401		EXEMPT	RECOVERY CENTER	40,000
YSS FRANCIS LAUER 50 N EISENHOWER AVE MASON CITY, IA 50401		EXEMPT	RECOVERY CENTER	40,000
ZION LUTHERAN CHURCH AND PRESCHOOL 1005 11TH AVE N HUMBOLDT, IA 50548		EXEMPT	INDOOR PLAY EQUIPMENT/DIE CUT LETTERS&NUMBERS	1,000
Total . . . . ▶ **3a**				437,740

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TY 2019 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	930	930	0	0

TY 2019 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
VANGUARD HIGH YIELD CORPORATE FUND	72,164	70,345

TY 2019 Investments Corporate Stock Schedule

Name: FIRST CITIZENS CHARITABLE FOUNDATION INC

EIN: 42-1451615

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
AT&T INC	11,168	12,818
ABBVIE INC	10,869	11,864
ALTRIA GROUP INC	4,030	3,843
AMCOR PLC ORD	2,344	2,298
ASTRAZENECA PLC SPON	2,355	2,893
BCE INC COM	8,296	8,389
BERKSHIRE HATHAWAY INC	32,533	67,950
BRITISH AMER TOBACCO	4,221	3,779
CDN IMPERIAL BK	9,847	9,651
CHEVRON CORPORATION	8,562	9,279
CISCO SYSTEMS INC	2,445	2,638
COCA COLA	6,232	7,804
DOMINION ENERGY INC	7,288	9,193
DUKE ENERGY HOLDINGS	7,599	9,303
ENBRIDGE INC COM	4,417	4,812
EXXON MOBIL CORP	12,248	11,514
GILEAD SCIENCES INC	7,069	7,083
HUNTINGTON BANCSHARES INC	5,576	6,213
INVESCO LTD	3,375	2,553
KIMBERLY CLARK CORP	1,797	2,613
LYONDELLBASELL INDUSTRIES	3,536	3,968
NATIONAL GRID PLC	7,515	7,834
OCCIDENTAL PETROLEUM CORP	5,906	3,750
PFIZER INC COMMON STOCK	11,563	11,205
PNC FINANCIAL SVCS CORP	21,414	37,513
PPL CORP	6,380	7,714
PEPSICO INC	3,111	4,237
PHILLIP MORRIS INTL INC	9,378	9,700
REALTY INCOME CORP	1,681	2,872
REGIONS FINL CORP	2,418	2,814

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ROYAL DUTCH SHELL	2,382	2,399
SOUTHERN CO	4,149	5,797
TC ENERGY CORP	2,304	2,452
UNITED PARCEL SERVICE	3,941	4,214
VENTAS INC	4,617	4,619
VERIZON COMMUNICATIONS INC	8,713	10,684
WELLTOWER INC	4,091	5,479
BANK OF AMERICA PREFERRED	49,784	79,695
B P AMOCO SPONSORED ADR	10,214	9,510
GLAXOSMITHKLINE PLC	9,521	9,962
VODAFONE GROUP PLC	6,730	4,562

TY 2019 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		49,216	75,005
ISHARE S&P MIDCAP 400 VALUE		51,028	73,414
ISHARE S&P SMALLCAP 600 BARRA VALUE		33,225	61,104
ISHARE S&P SMALLCAP 600 GROWTH		28,712	63,789
ETF VANGUARD EMERGING MARKETS		82,594	84,048
ISHARE MSCI EAFE FUND		155,301	176,030
ISHARE DOW JONES INTL SELECT DIV IDX		66,638	64,622
ISHARES DJ US REAL ESTATE		73,762	96,803
T ROWE PRICE BLUE CHIP GROWTH FUND #93		30,500	33,692

TY 2019 Other Increases Schedule

Name: FIRST CITIZENS CHARITABLE FOUNDATION INC

EIN: 42-1451615

Description	Amount
CAPITAL GAIN	44,745
RETURN OF CAPITAL	288

TY 2019 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	8,688	8,688	0	0

TY 2019 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	285	285	0	0
FEDERAL EXCISE TAXES	911	911	0	0

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.**
▶ **Go to *www.irs.gov/Form990* for the latest information.**

OMB No. 1545-0047

2019

Name of the organization	**Employer identification number**
FIRST CITIZENS CHARITABLE FOUNDATION INC	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 33 1/3% 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	Employer identification number
FIRST CITIZENS CHARITABLE FOUNDATION INC	42-1451615

Part I Contributors 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.)

Name of organization	Employer identification number
FIRST CITIZENS CHARITABLE FOUNDATION INC	42-1451615

Part II **Noncash Property**

(see instructions). Use duplicate copies of Part II if additional space is needed.

(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

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.

(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