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FIRST CITIZENS BANCSHARES INC /DE/

Form 4 May 09, 2007

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

3235-0287

2005

0.5

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires:

OMB APPROVAL

Estimated average burden hours per response...

Section 16. Form 4 or

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * IRREVOCABLE TRUST UNDER **AGREEMENT DATED MARCH 28** 1990

(Street)

(State)

05/08/2007

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

(First) (Middle) FIRST CITIZENS BANCSHARES INC /DE/ [FCNCA]

4. Securities

1,000

(Check all applicable)

(Last)

(City)

1.Title of

Common

Stock

(Zip)

2. Transaction Date 2A. Deemed

3. Date of Earliest Transaction (Month/Day/Year)

4. If Amendment, Date Original

Filed(Month/Day/Year)

3.

Director Officer (give title below)

10% Owner Other (specify

> 7. Nature of Indirect Beneficial Ownership (Instr. 4)

PO BOX 31727

05/08/2007

6. Individual or Joint/Group Filing(Check

6. Ownership

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

D

Person

5. Amount of

CHARLOTTE, NC 28231

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

(Month/Day/Year)	Execution Date, if	TransactionAcquired (A) or				Securities	Form: Direct
	any	Code Disposed of ()	Beneficially	(D) or
	(Month/Day/Year)	(Instr. 8)	(Instr. 3,	tr. 3, 4 and 5)		Owned	Indirect (I)
						Following	(Instr. 4)
						Reported	
						Transaction(s)	
						(Instr. 3 and 4)	
		Code V	Amount	(D)	Price	,	
						294,040	D
						,,,,,,	
	(Month/Day/Year)	any	any Code	any Code Disposed (Month/Day/Year) (Instr. 8) (Instr. 3,	any Code Disposed of (D (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and (A) or	any Code Disposed of (D) (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or	any (Month/Day/Year) Code Disposed of (D) Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) Code V Amount (D) Price (Instr. 3 and 4)

P

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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1

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration	Title	or Number		
						Exercisable Date	Date	ritte			
				C 1 W	(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

X

IRREVOCABLE TRUST UNDER AGREEMENT DATED MARCH 28 1990 PO BOX 31727

CHARLOTTE, NC 28231

Signatures

David L. Ward,

Trustee 05/09/2007

**Signature of Reporting Date

Person

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2