### FIRST CITIZENS BANCSHARES INC /TN/

Form SC 13G February 17, 2009

## SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### SCHEDULE 13G

Under the Securities Exchange Act of 1934 (AMENDMENT #2)

# FIRST CITIZENS BANCSHARES, INC. (Name of Issuer)

# COMMON CAPITAL STOCK (Title of Class of Securities)

319462-10 (CUSIP Number)

- Check the following box if a fee is being paid with this statement. [] (1) Name and S.S. Number of Reporting Person First Citizens National Bank Employee Stock Ownership Plan and Trust 62-0201100 (2) Check the Appropriate Box if a Member of a Group (See Instructions) (a) [X] (b) [ ] (3) SEC Use Only (4) Citizenship or Place of Organization: Dyersburg, Tennessee Number of Shares Beneficially Owned by Each Reporting Person with (5)Sole Voting Power 735,223 **Shared Voting Power** 0 (6)(7)Sole Dispositive Power 735,223
- (8) Shared Dispositive Power 0
  (9) Aggregate Amount Beneficially Owned by Reporting Person 735,223
  (10) Check if the Aggregate Amount in Row (9) Excludes Certain Shares []
  (11) Percent of Class Represented by Amount in Row (9) 19.78%
  (12) Type of Reporting Person EP

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### Item 4. Ownership as of December 31, 2008

(a) Amount Beneficially Owned: 735,223

(b) Percent of Class: 19.78%

(c) Number of shares as to which such person has:

(i) sole power to vote or to direct the vote 735,223

(ii) shared power to vote or to direct the vote

(iii) sole power to dispose or to direct the disposition of 0

(iv) shared power to dispose or to direct the disposition of 735,223

#### Item 10. Certification

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such purposes or effect.

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: February 4, 2009	/s/ JUNE JONES ADMINISTRATOR of First Citizens National Bank ESOP Plan & Trust
Date: February 4, 2009	/s/ KERRIE HECKETHORN ADMINISTRATOR of First Citizens National Bank ESOP Plan & Trust
Date: February 4, 2009	/s/ JOHN TUCKER  ADMINISTRATOR of First Citizens National Bank ESOP Plan & Trust
Date: February 4, 2009	/s/ LAURA BETH BUTLER ADMINISTRATOR of First Citizens National Bank ESOP Plan & Trust
Date: February 4, 2009	/s/ SHERRELL ARMSTRONG ADMINISTRATOR of First Citizens National Bank ESOP Plan & Trust