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CITIGROUF	P INC									
Form 4	-									
July 06, 2005	1 /							OMB AF	PPROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287	
Check the	ter.							Expires:	January 31,	
Subject to Section 16. Form 4 or			CHANGES IN BENEFICIAL OW SECURITIES					Estimated a burden hou response	0	
Form 5 obligation may cont See Instru 1(b).	ns Section 17(a	a) of the Pub	tion 16(a) of th blic Utility Hole the Investment	ding Con	npany	y Act of	1935 or Section	n		
(Print or Type F	Responses)									
1. Name and A WEILL SAI	mbol	er Name and Ticker or Trading ROUP INC [C]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (N	Iiddle) 3.	3. Date of Earliest Transaction				(Chec.	leck an applicable)		
			onth/Day/Year) /01/2005				X Director X Officer (give below)	ve title 10% Owner Other (specify below) Chairman		
			If Amendment, Da ed(Month/Day/Year	ndment, Date Original nth/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEW YOR	K, NY 10043						Form filed by M Person			
(City)	(State)	(Zip)	Table I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Da any (Month/Day/	Code	4. Securi on(A) or Da (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	07/01/2005		Code V J	Amount 63.9 (1)	(D) A	Price \$ 47.64	(11341.5 and 4) 16,441,735 (2) (3)	D		
Common Stock							39,419.9	I	By 401(k) Plan.	
Common Stock							600 <u>(4)</u>	Ι	By Spouse.	

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

Persons who respond to the collection of information contained in this form are not (9-02) required to respond unless the form

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displays a currently valid OMB control number.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
hepoting of the runner runness	Director	10% Owner	Officer	Other		
WEILL SANFORD I C/O CITIGROUP INC. CORPORATE LAW DEPT. 425 PARK AVENUE, 2ND FLOOR NEW YORK, NY 10043	Х		Chairman			
Signatures						
Sanford I. Weill by Shelley J. Dropkin, Attorney-in-Fact	07/06/2005					
**Signature of Reporting Person		Date				

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).
- (1) Reinvestment of cash, including dividends and interest, under the Compensation Plan for Non-Employee Directors.
- Includes 6,965.1 deferred shares of common stock held under The Travelers Insurance Company Deferred Compensation Plan for Non-Employee Directors for the benefit of the Reporting Person.
- (3) Includes 295,946 shares directly beneficially owned by the Reporting Person in his capacity as trustee of two Grantor Retained Annuity Trusts.
- (4) The Reporting Person disclaims beneficial ownership of these securities.

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.