## Edgar Filing: Turley James S - Form 4

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April 02, 20	19											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549								OMMISSION	OMB Number:	3235-0287		
Check the if no lon subject to Section Form 4 Form 5	so <b>STATE</b> 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES										
obligatio may cor <i>See</i> Inst 1(b).	tinue. Section 17	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										
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> Turley James S			2. Issuer Name <b>and</b> Ticker or Trading Symbol CITIGROUP INC [C]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)		3. Date of Earliest Transaction				(Check all applicable)					
CORPORA	ROUP INC., TE LAW DEPT ICH STREET			Day/Year)			-	X Director Officer (give t below)		Owner r (specify		
	(Street)	Street) 4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
NEW YORK, NY 10013			P				Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative S	ecuri	ties Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Month/Day/Year) 2. Transaction Date 2A. Deemed Execution Date, i any (Month/Day/Year)			Date, if	Code (Instr. 3, 4 and 5)				Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
Common Stock	04/01/2019			A	94.1529 (1)	A	\$ 63.05	13,253.1102 (2)	Ι	See Footnote		
Common Stock	04/01/2019			А	14.6923 (1)	А	\$ 63.05	6,008.8884	D			

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 required to respond unless the form displays a currently valid OMB control number.

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

## **Reporting Owners**

Reporting Owner Name / Address		Relationships					
		10% Owner	Officer	Other			
Turley James S C/O CITIGROUP INC., CORPORATE LAW DEPT. 388 GREENWICH STREET NEW YORK, NY 10013	х						
Signatures							
James S. Turley by Joseph B. Wollard, Attorney-in-Fact		/02/2019					
**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.
- (2) Represents deferred shares of common stock held by the Issuer for the benefit of the Reporting Person pursuant to the Issuer's Compensation Plan for Non-Employee Directors.

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.