FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

| | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* CARNEY BRIAN | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>Citi Trends Inc</u> [CTRN] | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
|--|---|--------------|-------------------------------------|----------|---|--------------|--------|--|---|-------|--|--|-------------------|--|--|----------------------------------|--|--|---|
| (Last) | (Fi | st) (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/09/2023 | | | | | | | | | | | cer (give title | | Other (: below) | |
| C/O CITI TRENDS, INC. 104 COLEMAN BLVD. | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| (Street) SAVANNAH GA 31408 | | | | | Form filed by One Reporting Person Form filed by More than One Reportin Person | | | | | | | | | | | | | | |
| (City) | (City) (State) (Zip) | | | | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | ended to | | | |
| | | Table | I - Noi | n-Deriva | tive S | ecui | rities | s Acq | uired, I | Disp | osed of | i, or | Ben | efici | ally Ov | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Execution Date, | | | Date, | Transaction Disposed Code (Instr. and 5) | | | ties Acquired (A) (I Of (D) (Instr. 3, 4 | | | Secu Bene Own Follo | ficially ed wing | Forn (D) c | n: Direct or rect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | (A (D | A) or D) | Price | | rted saction(s) : 3 and 4) | | | |
| Common Stock 06/09/2 | | | | | 2023 | | | A | | 4,058 | | A | \$ <mark>0</mark> | 46,114 | | | D | | |
| | 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) | ative Conversion Date Execution D ity or Exercise (Month/Day/Year) if any | | on Date, Transaction Code (Instr | | | 5. Number | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | te | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4 | | ; ; | 8. Price o Derivativo Security (Instr. 5) | | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nun of | ount nber ıres | | | | | |

Explanation of Responses:

<u>/s/ Jason Moschner as</u> <u>attorney-in-fact</u>

06/13/2023

** Signature of Reporting Person Date

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

* 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.

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 Number.