FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response: 0								

	tion 1(b).	iuc. occ		Filed							es Exchang npany Act o		.934		nours	s per re	esponse:	0.5	
1. Name and Address of Reporting Person*  JENKINS MARGARET L					2. Issuer Name and Ticker or Trading Symbol Citi Trends Inc [ CTRN ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
(Last) (First) (Middle) C/O CITI TRENDS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 06/30/2020									Offic	Officer (give title below)		Other (below)	specify	
104 COLEMAN BLVD					4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAVANN	NAH GA	A 3	1408											X Forr	,				
(City)	(St	ate) (Z	Zip)																
		Table	I - Noi	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or Be	nefici	ally Ow	ned				
Date				th/Day/Year) if a		2A. Deemed Execution Date, f any (Month/Day/Year)				ies Acquired (A Of (D) (Instr. 3,		and Secur Benet Owne	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)		Trans	ported ansaction(s) str. 3 and 4)			(Instr. 4)	
Common Stock 06/3				06/30/	/2020		A		2,968	A	\$	0 7,358			D				
		Tal									osed of, o				ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		of		6. Date Exercisable Expiration Date (Month/Day/Year)		te	Amoun		8. Price of Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)		Date Exercisa	able	Expiration Date	o	umber f						

**Explanation of Responses:** 

/s/ Jason Moschner as attorney-in-fact

07/01/2020

\*\* 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.