FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APF	PROVAL						
OMB Number: 3235-03							
Estimated average burden							
hours per response	e: 0.5						

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

CARNEY BRIAN			Date of Event equiring Staten Month/Day/Year 1/28/2007	nent	3. Issuer Name and Ticker or Trading Symbol Citi Trends Inc [CTRN]						
(Last) (First) (Middle) C/O CITI TRENDS, INC.					ationship of Reporting Perso k all applicable) Director	rson(s) to Issuer 10% Owner Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year)			
102 FAHM STREET								Officer (give title below)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) SAVANNAH	GA	31401								y More than One	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
					Beneficially Owned (Instr. 4) For or I				Nature of Indirect Beneficial Ownership nstr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
Expir			2. Date Exercisable and Expiration Date (Month/Day/Year)			3. Title and Amount of Securitie Underlying Derivative Security		4. Conversi or Exerci	rcise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	n Title	e	Amount or Number of Shares	Price of Derivativ Security			

Explanation of Responses:

No securities are beneficially owned.

<u>/s/ Brian Carney</u> <u>11/30/2007</u>

** 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 5 (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.