FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT OF | CHANGES IN BENI | EFICIAL OWNERSHIP |
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OMB APPROVAL OMB Number: 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).

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* SMITH BRUCE D | | | | | 2. Issuer Name and Ticker or Trading Symbol Citi Trends Inc [CTRN] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|--|----------|------------------|--------|---|--|--|------|---|---|---------|---|---|---|---|--|---|--------|------------|
| SMITH | BRUCE | <u>D</u> | | | 1 | | CIICO | | OTTE. | , | | | | | X Dire | ctor | | 10% C | wner |
| | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/22/2019 | | | | | | | | 1 | X Office below | | | (specify | | |
| 104 COLEMAN BLVD. | | | | | | | | | | | | | 03/ | | CEO and COO | | | | |
| (Street) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| SAVANN | IAH G | A 3 | 31408 | | | | | | | | | | | | | n filed by One | - | _ | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | Fori Pers | n filed by Moi son | re than O | ne Rep | orting |
| | | Tabl | e I - Nor | -Deriv | ative | Se | curitie | s Ac | quired, | Dis | posed o | f, or I | Bene | ficia | lly Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Execution Date, | | Transaction Disposed Code (Instr. 5) | | | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | d Secui Benet Owne | icially d Following | 6. Owne Form: D (D) or In (I) (Instr | irect direct | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A (D |) or) | Price | | action(s) 3 and 4) | | | (Instr. 4) |
| Common Stock | | | 03/22 | 2/2019 | | | | F | | 1,158 | B D \$ | | \$18. | 36 1 | 114,620 | | | | |
| | 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 Conversion or Exercise (Month/Day/Year) Trice of Derivative Security 3. Transaction Date Execution Date, if any (Month/Day/Year) | | Date, y/Year) | | of Directions of Of Directions of Of Of Office of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | ount | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Own Forn Direc or In (I) (Ir | ership 1: ct (D) direct 1str. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

/s/ Jason Moschner as attorney- 03/25/2019 in-fact

** 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.