## Edgar Filing: Henry Peter B. - Form 4

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Form 4	D.										
February 15	, 2019										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMMISSION	OMB APPROVAL			
UNITED STATES SEC					AND EXCH , D.C. 2054		UMIMISSION	OMB Number:	3235-0287		
if no lon	oer.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								January 31, 2005	
subject t Section Form 4 o Form 5		SECUI	RITIES	Act of 1934,	Estimated a burden hour response	•					
obligatic may con <i>See</i> Instr 1(b).	ons Section 17(	a) of the H	Public U	tility Hol		ny A	ct of	1935 or Section	L		
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Henry Peter B.			2. Issuer Name <b>and</b> Ticker or Trading Symbol CITIGROUP INC [C]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (	Middle)	3. Date o	of Earliest T	ransaction			(Check	an applicable	)	
C/O CITIGROUP INC., CORPORATE LAW DEPT., 388 GREENWICH STREET			(Month/Day/Year) 02/14/2019					X_ Director 10% Owner Officer (give title Other (specify below) below)			
				. If Amendment, Date Original ïled(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEW YOR	K, NY 10013							Form filed by Me Person			
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative Sec	uritie	s Acqu	ired, Disposed of,	or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. 4. Securities Acquired (A Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			red (A)	Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock	02/14/2019			А	2,402.768 (1)	А	\$0	6,771.1961 (2)	D		
Common Stock								13,918.2924 (2) (3)	Ι	See Footnote	

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying rities : 3 and 4)	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					
	Director	10% Owner	Officer	Other		
Henry Peter B. C/O CITIGROUP INC., CORPORATE LAW DEPT. 388 GREENWICH STREET NEW YORK, NY 10013	Х					
Signatures						
Peter B. Henry by Joseph B. Wollard, Attorney-in-Fact	02/	15/2019				
**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) Deferred shares awarded under the Issuer's Compensation Plan for Non-Employee Directors.
- (2) Reflects 2,639.4168 shares of deferred common stock which vested on 1/20/2019 and were transferred to the Reporting Person's deferred compensation account in accordance with the terms of the Issuer's Compensation Plan for Non-Employee Directors.
- (3) 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.