## Edgar Filing: WRIGHT DEBORAH C - Form 4

WRIGHT D	EBORAH C											
Form 4												
July 02, 2018	8											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL				
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287				
Check the	is box		v v a	sinington,	, <b>D</b> .C. 20.					January 31,		
if no long		EMENT O	F CHAN	IGES IN	BENEFI	CIA	L OWN	NERSHIP OF	Expires:	2005		
Section 16.				SECURITIES					Estimated average burden hours per			
Form 4 o									response 0.			
Form 5	Filed p	oursuant to S	Section 1	6(a) of th	e Securiti	es Ez	xchange	e Act of 1934,				
obligation may cont		7(a) of the	Public U	tility Hold	ding Com	pany	Act of	1935 or Section	ı			
See Instru		30(h)	of the In	vestment	Compan	y Act	of 194	0				
1(b).												
(Print or Type I	Responses)											
× 51	1											
1. Name and Address of Reporting Person <u>2. Issu</u>				uer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to				
WRIGHT D	Symbol	-				Issuer						
			CITIG	ROUP ING	C [C]			(Checl	k all applicable	)		
(Last)	(First)	(Middle)	3. Date of	f Earliest Tı	ransaction			(Cheer		)		
			(Month/E	Day/Year)				X Director		Owner		
CITIGROUP INC., CORPORATE			07/01/2018					Officer (give title Other (specify below) below)				
	., 388 GREEN	WICH						001011)	0010(1)			
STREET												
			4. If Ame	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mor	(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
	Z NIV 10012							_X_Form filed by O				
NEW YOR	K, NY 10013							Person				
(City)	(State)	(Zip)	Tabl	le I - Non-E	Derivative S	Securi	ties Acqu	uired, Disposed of,	, or Beneficial	ly Owned		
1.Title of	2. Transaction D	ned	3.	4. Securit	es Ac	quired	5. Amount of	6.	7. Nature of			
Security	(Month/Day/Yea	n Date, if		on(A) or Dis	-		Securities	Ownership	Indirect			
(Instr. 3)		any (Month/I	Day/Year)	Code (Instr. 8)	(Instr. 3, 4	and 5	5)	Beneficially Owned	Form: Direct Benefit (D) or Owner	Beneficial Ownership		
		(WORLD)	Jay/ I cal)	(111501.0)				Following	Indirect (I)	(Instr. 4)		
						(A)		Reported	(Instr. 4)			
						or		Transaction(s) (Instr. 3 and 4)				
-				Code V		(D)	Price	(msu. 3 anu 4)				
Common Stock	07/01/2018			А	21.848 (1)	А	\$ 67.57	4,626.975	D			
STOCK					<u> </u>		07.57					

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 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**

<b>Reporting Owner Name / Address</b>	Relationships					
	Director	10% Owner	Officer	Other		
WRIGHT DEBORAH C CITIGROUP INC., CORPORATE LAW DEPT. 388 GREENWICH STREET NEW YORK, NY 10013	Х					
Signatures						
Deborah C. Wright by Joseph B. Wollard, Attorney-in-Fact		07/02/	/2018			
<u>**</u> Signature of Reporting Person		Dat	e			

## **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) Reinvestment of cash, including dividends and interest, under the 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.