FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington, D.C. 20049	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-02		
STATEMENT OF STIANGES IN BEINE FORE OWNERSTIN	Estimated average burden			

	OMB Number:	3235-028								
	Estimated average burden									
- 1	hours per response:	0.1								

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*  WHIDDON THOMAS E						2. Issuer Name and Ticker or Trading Symbol CARTERS INC [ CRI ]										olicable)	g Person(s) to Issuer 10% Owner			
(Last) (First) (Middle) 3438 PEACHTREE ROAD NE SUITE 1800						3. Date of Earliest Transaction (Month/Day/Year) 08/03/2017									Officer (give title Other (s below)  Director					
(Street) ATLANT			30326 Zip)		- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	-/					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 and 1)			and 5) Secur Benef Owne		ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership							
							Code	v	Amount	(A) or (D)		се	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)				
Common Stock 08/03/2					2017	017		S		7,500	D \$89		9.54(1)	62	2,849 <sup>(2)</sup>	D				
Common Stock 08/04/2				2017	2017		S		10,000 D \$9		0.96 <sup>(3)</sup>	52	2,849 <sup>(2)</sup>	D						
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. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Der Sec (Ins	ivative curity ctr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
			Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Shares	er								

## **Explanation of Responses:**

- 1. This is a weighted average price. The shares were sold in multiple trade executions at prices ranging from \$89.51 to \$89.62, inclusive. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price.
- 2. Some of these shares were granted pursuant to the Issuer's Amended and Restated Equity Incentive Plan as part of the Reporting Person's annual director compensation.
- 3. This is a weighted average price. The shares were sold in multiple trade executions at prices ranging from \$90.75 to \$91.35, inclusive. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price.

## Remarks:

/s/Michael C. Wu, Attorney-in-08/07/2017

**Fact** 

\*\* Signature of Reporting Person

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.