| SEC Form 4 |
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FORM 4

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | | | |
| Estimated average burden | | | | | | | | | | |
| hours per response: | | | | | | | | | | |

| Obligations m | . Form 4 or Form 5 ay continue. See | | | _ | Estimated ave hours per res | erage burden sponse: 0.5 | | |
|---|--|-----------------|---|--|--------------------------------|---|--|--|
| Instruction 1(| b). | | Filed pursuant to Section 16(a) of the Securities Exchange Act of 19: or Section 30(h) of the Investment Company Act of 1940 | 34 | | | | |
| 1. Name and Address of Reporting Person* <u>Westenberger Richard F.</u> (Last) (First) (Middle) | | | 2. Issuer Name and Ticker or Trading Symbol <u>CARTERS INC</u> [CRI] 3. Date of Earliest Transaction (Month/Day/Year) | 5. Relationship o (Check all applica Director X Officer (below) | able) give title | 10% Owner Other (specify below) | | |
| 3438 PEACHTREE ROAD NE SUITE 1800 | | NE | 02/10/2023 | EVP and CFO | | | | |
| (Street) ATLANTA | , | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | Line) X Form file | ed by One Repo | g (Check Applicable orting Person n One Reporting | | |
| (City) | (State) | (Zip) | | | | | | |
| | | Table I - Non-I | Derivative Securities Acquired, Disposed of, or Ben | eficially Owned | 1 | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|---|---|--------|---------------|--------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150. 4) |
| Common Stock | 02/10/2023 | | F | | 1,317 | D | \$77.4 | 86,368(1) | D | |
| Common Stock | 02/12/2023 | | F | | 563 | D | \$77.4 | 85,805 ⁽¹⁾ | 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. Transa Code (8) | | 5. Number of Expiration Da Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) 6. Date Exerci Expiration Da (Month/Day/Ye | | ate | e Amount of | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---|---|--|---|------------------------------|---|---|-----|---------------------|--------------------|-------|--|--|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Some of these shares are restricted shares that are subject to either time-vesting or performance-based restrictions.

Remarks:

/s/Scott F. Duggan, Attorney-02/13/2023 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.