FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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Nashington,	D.C.	20049	

STATEMENT	OF	<b>CHANGES</b>	IN BE	ENEFICIA	L OWN	ERSHIP
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OMB APP	OMB APPROVAL								
OMB Number:	3235-0287								
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

Name and Address of Reporting Person*     Borenstein Hali				2. Issuer Name and Ticker or Trading Symbol CARTERS INC [ CRI ]								ck all app	,	ng Pers	son(s) to Is				
(Last)	(Fir	st) (N	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/16/2024									Office below	er (give title		Other (s below)	specify
3438 PE. SUITE 1		ROAD NE			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	ΓA G <i>I</i>	A 3	0326			X Form filed by One Reporting Persor Form filed by More than One Report Person													
(City)	(Sta	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											nded to			
		Table	I - No	n-Deriva	tive S	Secu	rities	s Acq	uired,	Dis	posed of	, or E	Bene	ficial	ly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			Execution Date,				es Acquired (A) o Of (D) (Instr. 3, 4				ies ially Following	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount	(A) (D)	or I	Price		ection(s) 3 and 4)			(Instr. 4)	
Common	Stock			05/16/2	2024				Α		2,293(1)	A	\	\$ <mark>0</mark>	12,45	53.5284		D	
		Tal									osed of, convertib				Owned	t			
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, Tracturity or Exercise (Month/Day/Year) if any Co		Transa Code (				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Di Sc (In	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y [1	10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	nber					

## **Explanation of Responses:**

1. These shares were granted as part of the reporting person's director compensation.

## Remarks:

/s/Derek Swanson, Attorney-\*\* Signature of Reporting Person

05/20/2024 in-Fact

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.