## FORM 5

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

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	Washington, D.C. 20
Check this box if no longer subject to	
Section 16. Form 4 or Form 5	
obligations may continue. See Instruction 1(b).	ANNUAL STATEMENT OF CHA
monucuon no).	OWNEDCH

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL						
OWNERSHIP						

OMB APP	ROVAL					
OMB Number:	3235-0362					
Estimated average burden						
hours per response:	1.0					

Form 3 Holdings Reported.

X Form 4 7	Transactions Re	eported.	Fil	or Sectio	11 30(11) 0	i uie ii	IIVESI	ment Co	mpany Act	of 1940								
1. Name and Address of Reporting Person* PACIFICO JOSEPH					2. Issuer Name <b>and</b> Ticker or Trading Symbol CARTERS INC [ CRI ]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify						er		
	ct) (First) (Middle) O CARTER'S, INC., THE PROSCENIUM O PEACHTREE STREET NE, SUITE 900				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2005						ar)	Y Officer (give title Other (specify below)  President						
(Street) ATLANTA		3 ate) (2	0309 Zip)	-	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
1. Title of Sec	curity (Instr. 3)		e I - Non-Deri	2A. Deemed			quire		<u> </u>				5. Amount	of	6. Own	ershin	7. Nat	ure of
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year			Execution Date, Transa		ansac ode (Ir	4. Securities Acquired (A) or Dispose (D) (Instr. 3, 4 and 5)  Amount (A) or Price				Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		Form: I (D) or Indirect	Form: Direct Indi D) or Ber ndirect (I) Ow		irect neficial rnership str. 4)			
Common S	Stock								237,944		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 Date (Month/Day/Year Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Expiration Date (Month/Day/Year) (A) sed str.		Amour Securi Under Deriva	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					(A)	(D)	Date Exer	e rcisable	Expiration Date	Title	Amo or Num of Shar	nber		Transaction(s (Instr. 4)		)		
Employee						_		Cioabic	Date	Title	Silai	103						
Employee Stock Option (Right to Buy)	\$29.61	03/22/2004		4A	100,000			(1)	03/22/2014	Comm	on 100		\$0	100,	000	D		
Stock Option (Right to	\$29.61 \$62.35	03/22/2004		4A	100,000					Comm	on 100,	,000	\$0	100,		D D		

## **Explanation of Responses:**

- 1. These options are time options exercisable in five equal annual installments beginning on March 22, 2005.
- 2. These options are performance options that vest at the end of fiscal year 2009 upon the achievement of defined performance criteria.
- 3. These options are exercisable in five equal annual installments beginning on August 15, 2002.

Joseph Pacifico

02/14/2006

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.