FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Machinatan | D C | 20540 | |
|-------------|------|-------|--|
| Nashington, | D.C. | 20049 | |

| STATEMENT | OF CHANGE | S IN BENEFICI | AL OWNERSHIP |
|------------------|------------------|---------------|---------------------|

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

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* Eagle Jevin | | | | | 2. Issuer Name and Ticker or Trading Symbol CARTERS INC [CRI] | | | | | | | | ck all app | licable) tor | ng Person(s) to I | | | | |
|--|--|--|---|---------------|---|--|--------------------------|---|---|--------------------|--|--|---|-------------------------|--|---|--------|--|-----------|
| (Last) | (Fir | st) (N | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/29/2024 | | | | | | | Office below | er (give title | | Other (s pelow) | pecify | | |
| 3438 PEACHTREE ROAD NE SUITE 1800 | | | | | 4. If A | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) | ΓA GA | A 3 | 0326 | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | | | | | |
| (City) | (St | 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. | | | | | | | | | ided to | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secui | rities | Acq | uired | , Dis | posed of | , or E | 3ene | ficial | ly Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | Execution Dat | | Date, | Transaction Code (Instr. | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | Securit Benefic Owned | Securities F Beneficially (Dwned Following (| | rect direct direct direct | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) |) or) Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | Instr. 4) |
| Common | Stock | | | 03/29/2 | 2024 | | | | A | | 15.8776 | 1) | A | \$0 | 15,8 | 82.5284 | 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) 5. Numb Oberivative Acquire (A) or Dispose of (D) (Instr. 3, and 5) | | vative urities uired or osed) r. 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | S (I | . Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownersh Form: Direct (D or Indirect (I) (Instr. | n: ct (D) idirect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | Code | ode V (A) (D) | | Date Exercis | sable | Expiration Date | Title | Amount or Number of Shares | | | | | | | |

Explanation of Responses:

1. Represents shares of common stock credited to the Reporting Person as a result of a dividend payment with respect to the Company's common stock, in accordance with and to be settled pursuant to the terms of the Company's director deferred compensation program.

Remarks:

/s/Derek Swanson, Attorneyin-Fact

** Signature of Reporting Person

04/01/2024

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.