FORM 4

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

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Print or Ty	pe Response	s)										•					
1. Name and Address of Reporting Person* Williams James Floyd				2. Issuer Name and Ticker or Trading Symbol TANGER FACTORY OUTLET CENTERS, INC [SKT]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Executive VP & CFO							
(Last) (First) (Middle) 3200 NORTHLINE AVENUE, SUITE 360					3. Date of Earliest Transaction (Month/Day/Year) 02/15/2022							Exe	cutive VP &	CFO			
GREENS	SBORO, N	(Street)		4. If A	Amendment,	Date C	Origin	al Fi	led(Month	n/Day/Year))	_X_ Form fil	ual or Joint/0 ed by One Repo ed by More than	orting Person		able Line	:)
(City	/)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Ov					Owned								
1.Title of Security (Instr. 3)		Ι	2. Transaction Date Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)			4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5) (A) or		of (D)	Beneficia Reported (Instr. 3 a	ant of Securities ally Owned Following d Transaction(s) and 4)		(I)	Bene	direct eficial ership
Commor	ı Stock	(02/15/2022			Coo		V	9,244	D	Price \$ 16.4	114 333	2		(Instr. 4)		
			Table II -	Deriva	tive Securiti	ies Acc	t	he f	orm dis	splays a	curr	ently valid	iired to res OMB cont				
1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/Yo	3A. Deemed Execution Da	nte, if	Transaction Code (Instr. 8)	5.	er ative	6. Da	ate Exerc Expirationth/Day/	cisable on Date	7. An Un Sec	Title and nount of derlying curities str. 3 and		9. Number Derivative Securities Beneficially Owned Following	Owner Form of Derivation Securi	ship of Botive O	1. Natu f Indire Benefic Owners Instr. 4

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Williams James Floyd 3200 NORTHLINE AVENUE, SUITE 360 GREENSBORO, NC 27408			Executive VP & CFO				

Signatures

/s/ James F. Williams	02/17/2022			
**Signature of Reporting Person	Date			

Explanation of Responses:

- * 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.