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

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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

| | Responses | / | | | | | | | | | | | | | | | |
|--|--------------|---------------------------------|--------------------------|---|-----------------------------------|---------------------------------|------------|----------------------|--|---|---|---|--|--------------|---------------------------------------|--|--|
| 1. Name and Address of Reporting Person* TANGER STEVEN B | | | TA | 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) _X_ Director | | | | | | |
| (Last) (First) (Middle) 3200 NORTHLINE AVENUE, SUITE 360 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2014 | | | | | | | | Pr | esident and | CEO | | | |
| (Street) | | | 4. If | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| GREENSBORO, NC 27408 (City) (State) (Zip) | | | | Table I - Non-Derivative Securities Acqu | | | | | | Acqui | ired, Disposed of, or Beneficially Owned | | | | | | |
| 1.Title of Security (Instr. 3) | | | Date (Month/Day/Year) | | 2A. Deemed Execution Date, any | | | f Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | | Following | 6. Ownership Form: | Beneficial |
| | | | | | (Mont | th/Day/Y | ear) | Code | v | Amoun | (A) or (D) | Price | (Instr. 3 | or Ir (I) | | or Indirect | Ownership (Instr. 4) |
| Common Sto | tock | | 12/31 | 1/2014 | | | | F | | 199,98 | 0 D | \$ 37.65 | 754,81 | 6 | | D | |
| Reminder: Repo | oort on a so | eparate line fo | or each | class of secu | rities b | eneficial | lly o | wned di | Pe | rsons wl | no respo | | | ction of inf | | | 1474 (9-02) |
| Reminder: Repo | oort on a so | eparate line fo | or each | Table II - | Deriv | ative Sec | curit | ies Acq | Per cor the | rsons whotained in form die | no respo n this fo splays a | rm are curren eficiall | not requ itly valid | uired to res | formation spond unle trol numbe | ss | 1474 (9-02) |
| 1. Title of 2. Derivative Cor Security (Instr. 3) Pric Der | onversion | 3. Transaction Date (Month/Day/ | n 'Year) | Table II - 3A. Deemed Execution Da | Deriva (e.g., p | ative Seconts, call 4. Transact | curition) | ies Acq arrants, | Per con the continued, I do not continued, I do not continued and contin | rsons whotained in form die | no respo n this fo splays a of, or Ber tible securcisable on Date | rm are current rities) 7. Tit Amo Unde Secur | not required valid y Owned the and unt of earlying | OMB conf | spond unle | of 10. Ownersl Form of Derivati Security Direct (l or Indire | 11. Natu of Indire Benefici Ownersh (Instr. 4) |

Keporung Owners

| | Relationships | | | | | |
|---|---------------|--------------|-------------------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| TANGER STEVEN B 3200 NORTHLINE AVENUE, SUITE 360 GREENSBORO, NC 27408 | X | | President and CEO | | | |

Signatures

| /s/ James F. Williams, attorney-in-fact for Mr. Tanger | 01/02/2015 |
|--|------------|
| **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.