FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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) Other (specify below)									
(Last) (First) (Middle) 3200 NORTHLINE AVENUE, SUITE 360				3. Date of Earliest Transaction (Month/Day/Year) 05/18/2015							y/Year)			Sr.VP &CAC	<u>, </u>				
(Street) GREENSBORO, NC 27408				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person									
(City	′)	(State)		(Zip)			Ta	able I	- Non	-Der	ivative :	Securities	Acqu	ired, Disp	posed of, or Beneficially Owned				
1.Title of Security (Instr. 3)			2. To Date (Mo		any	cution Da	tion Date, if	f Code (Instr. 8)		4. Securities Acqui(A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	ount of Securities cially Owned Following ed Transaction(s)		Ownership o Form:	7. Nature of Indirect Beneficial		
					(Month/Day/Yea		r ear		ode	V	Amour	(A) or (D)	Price		(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock		05/1	18/2015					G	V	865	D	\$ 0	69,003	(1)		D		
				Table II - I					quire	the f	orm dis	splays a of, or Ber	curre reficial	ently valid	OMB cont	spond unles trol number			
1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/		3A. Deemed Execution Date	te, if	4. Transact Code	ion	5.	per rative rities ired rosed) . 3,	6. Da and 1 (Mon	ate Exer Expirationth/Day	on Date	7. T Am Und Sect (Ins 4)	Amount or Number of	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownersh Form of Derivati Security Direct (I or Indire	Beneficia Ownersh: (Instr. 4)	

Reporting Owners

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

Signatures

/s/ James F. Williams	06/01/2015
**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).
- (1) End of period holdings reflects holdings after the sale of 1,000 common shares on May 28, 2015 previously reported on Form 4.

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.