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

| 1. Name and Address of Reporting Person* GELDNER CARRIE A | | | | 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) 08/23/2017 | | | | | | | SVP, C | niei Marketii | ig Officer | |
| (Street) | | | | 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 tired, Disposed of, or Beneficially Owned | | | | |
| GREENSBORO, NC 27408 (City) (State) (Zip) | | | Table I - Non-Derivative Securities Acou | | | | | | | | | | | |
| Date | 2. Transaction Date (Month/Day/Year) | | med on Date, if | 3. Transac Code (Instr. 8) | | ction 4. Securities Acquired | | quired of (D) | 5. Amount of Securities Beneficially Owned Followi Reported Transaction(s) | | ies Following | 6. Ownership Form: | 7. Nature of Indirect Beneficial | |
| | | (Month/ | Day/Year | | ode | V | Amoun | (A) or (D) | Price | (Instr. 3 a | and 4) | Direct (D) Ov | | Ownership (Instr. 4) |
| 08/2 | 23/2017 | | | : | S | | 1,800 | 11) | * | 53,511 | | | D | |
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| ion Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4. Tr | 4. Transaction Code (Instr. 8) | | 5. | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | Title and mount of inderlying ecurities nstr. 3 and | Security (Instr. 5) | Derivative Securities Beneficially Owned Following Reported | Ownersh Form of Derivativ Security: Direct (I or Indire | Beneficia Ownershi (Instr. 4) |
| | | | | | | Date | | Expiration Date | n Title | or Number | | | | |
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| | Relationships | | | | | |
|--|---------------|--------------|------------------------------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| GELDNER CARRIE A 3200 NORTHLINE AVENUE, SUITE 360 GREENSBORO, NC 27408 | | | SVP, Chief Marketing Officer | | | |

Signatures

| /s/ James F. Williams, attorney-in-fact for Ms. Geldner | 08/25/2017 |
|---|------------|
| **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.