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 Type Responses) 1. Name and Address of Reporting Person * MORRISON LISA J			TANGEI	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) Senior VP Leasing					
3200 NORTH	(Last) (First) (Middle) 200 NORTHLINE AVENUE, SUITE 360				3. Date of Earliest Transaction (Month/Day/Year) 01/02/2018								Se	nior VP Lea	sing	
GREENSBOI	RO, NO	(Street)		4. If Amen	dment,	Date (Origina	al Filed(M	onth/Day/Yea	ar)		K_ Form fil	ual or Joint/0 ed by One Repo	rting Person	Check Applica	ble Line)
(City)		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea) any	ecution Date, if	(Instr. 8)		(A)	(A) or Disposed of (Instr. 3, 4 and 5)		Benefici Reporte		unt of Securities ially Owned Following d Transaction(s)		Form:	7. Nature of Indirect Beneficial
				(Month/Day	// Year	Co	de	V Amo	(A) or (D)	Prio		Instr. 3 a	na 4)			Ownership (Instr. 4)
Common Stoo	ock		01/02/2018			F	7	1,4	3 D	\$ 26.3	.51 4	12,024			D	
Reminder: Repor	ort on a se	eparate line for	r each class of sec	urities benefic	ially o	wned d	P	ersons	who resp				ction of inf			1474 (9-02
Reminder: Repor	ort on a se	eparate line for		- Derivative S	Securit	ies Ac	P c tl	Persons containe he form	who resp in this displays d of, or B	form a a cur	are n rrent	not requ ly valid	ction of inf lired to res OMB conf	spond unle	ess	1474 (9-02
1. Title of 2. Derivative Conv Security or Ex (Instr. 3) Price	e of	parate line for 3. Transaction Date (Month/Day/Y	Table II 3A. Deeme Execution I	- Derivative S	Securitalls, was	ies Acarrant	quired s, opti	Persons containe he form I, Dispose cons, cons	who resp in this displays d of, or B ertible se ercisable attion Date	form a a cur enefic curitie 7 A U S	cially ies) 7. Title Amount Underly Securit (Instr. 4)	Owned e and nt of	OMB conf	spond unle	of 10. Owners Form o Derivat Security Direct (or Indir	11. Nathip of India Benefit Owner (Instr. de D) eet

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
MORRISON LISA J 3200 NORTHLINE AVENUE, SUITE 360 GREENSBORO, NC 27408			Senior VP Leasing			

Signatures

/s/ James F. Williams, attorney-in-fact for Ms. Morrison	01/02/2018
**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.