FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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) | | | | | | | | | | | | | |
|--|---|--|---|---|---|-------|--|-------------------------------|---------------------------------|--|--|--|---|---|-------------|
| Name and Address of Reporting Person * Berman Bridget Ryan | | | | 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 10% Owner Officer (give title below) Other (specify below) | | | | | |
| 2 BAILEYS MILL ROAD, P.O. BOX 718 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/11/2010 | | | | | | | | | | | |
| (Street) NEW VERNON, NJ 07976 | | | | 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) | | | | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, i any (Month/Day/Year | (Instr. 8) | | etion | 4. Securities Acqu (A) or Disposed of (D) (Instr. 3, 4 and 5) | | of | Beneficial | nt of Securities ally Owned Following Transaction(s) and 4) | | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Cod | de | V | Amoun | (A) or (D) | Price | | | | (I) (Instr. 4) | |
| Common Stock 0 | | 01/11/2010 | | A | | | 2,548 (1) | A | \$ 0 | 2,548 | | D | | | |
| Common Stock | | | | | | | | | | 2,500 | | D | | | |
| Reminder: | Report on a s | separate line fo | r each class of secur Table II - I | ties beneficially o | | F | Personta conta | ons wh ained ir orm dis | o respor this for plays a | m are curre | e not requently valid | OMB con | formation spond unle trol numbe | ss | 1474 (9-02) |
| | | 1 . | (| e.g., puts, calls, w | arrants | , opt | ions, | convert | ible secur | rities) | | | | . 1 | 1 |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/\(^\) | Execution Date Year) any | e, if Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | Am Und Sec | Title and ount of derlying urities tr. 3 and | Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Owners Form of Derivati Security Direct (or Indire | Beneficia Ownersh (Instr. 4) | |
| | | | | Code V | (A) (| | Date Exer | | Expiration Date | Title | Amount or e Number of Shares | | | | |

Reporting Owners

| D 41 O N 4 | Relationships | | | | | | |
|--|---------------|--------------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| Berman Bridget Ryan 2 BAILEYS MILL ROAD P.O. BOX 718 NEW VERNON, NJ 07976 | X | | | | | | |

Signatures

| /s/ Thomas J. Guerrieri Jr, attorney-in-fact for Bridget Ryan Berman | 01/13/2010 |
|--|------------|
| **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) Represents grant of restricted shares approved by the Company's Board of Directors on January 11, 2010 under the Company's Amended and Restated Incentive Award Plan. The restricted shares vest evenly over a three year period on December 31st of each year.

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.