FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGE
obligations may continue. See Instruction 1(b).	Filed pursuant to Section 16(a)

OMB APPROVAL

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

S IN BENEFICIAL OWNE of the Securities Exchange Act of 1934 Investment Company Act of 1940	OMB Number: Estimated average hours per respor	9				
ker or Trading Symbol LACE RETAIL STORES	5. Rela (Check	(s) to Issuer				
<u></u>	X	Director		10% Owner		
	X	Officer (giv below)	e title	Other (specify below)		
action (Month/Day/Year)	Dro	cident and CI	20			

ELFER	S JANE	INC [PLCE]						<u>ES</u>		all appoint all all all all all all all all all al	olicable) ctor er (give title	g Person(s) to I: 10% (Other below	Owner (specify				
(Last) C/O THE	(Fi CHILDRE	rst)	Middle) TAIL STORES		3. Date of Earliest Transaction (Month/Day/Year) 02/03/2014					1	below) below President and CEO		,				
INC. 500	PLAZA D	RIVE															
(Street)	OLIC NI		07004	— 4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Indiv		·	Filing (Check A				
SECAUC	CUS NJ)7094 	-							Form filed by More than One Reporting Person						
(City)	(St	ate) (Zip)														
		Tabl	e I - Non-Der	ivative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or	Benef	icially	Own	ed		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at				and 5) Securities Beneficially		rities ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)	or Pri	ce	Trans	action(s) 3 and 4)		(111501.4)
Common Stock, par value \$0.10 per share 02/03/2			8/2014				S		48,308(1)		\$5	0.97(2)	3	32,494	D		
		Та	ble II - Deriv (e.g.,							osed of, convertib				wned			
Derivative Conversion Date Security or Exercise (Month/Day/Year) i	3A. Deemed Execution Date, if any (Month/Day/Year	Code	Transaction Code (Instr.		mber ative rities ired osed	Expiration Da		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		ative derivative ity Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amou or Numb of Share:	er				

Explanation of Responses:

1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 28, 2013. The shares were sold to pay tax liabilities incident to the vesting of deferred stock on February 1, 2014.

2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$50.64 to \$51.25, inclusive. The reporting person undertakes to provide to The Children's Place Retail Stores, Inc. (the "Company"), any security holder of the Company, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

> /s/ James E. Myers, as Attorney-In-Fact for Jane

02/04/2014

Date

Elfers

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.