FORM 4

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 | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
|--|--|
| obligations may continue. See | |
| Instruction 1(b). | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

| Name and Address of Reporting Person* POOLE GREGORY I | | | | | | | | | | | | | | | | tionship of Reportir all applicable) Director Officer (give title | | 10% | Owner (specify |
|---|--|--|---------------|----------|---|-----------------|-----------------|---|--|---------|-------------|--|---------------------|-----------------------|-----------------------|--|--|---|--|
| | Asst) (First) (Middle) O THE CHILDREN'S PLACE RETAIL STORES, IC. 500 PLAZA DRIVE | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/11/2014 | | | | | | | | | X | belov | v) `` | belov lobal Sourcii | <i>I</i>) | |
| (Street) SECAUC | CUS NJ | (|)7094 Zip) | | 4. If | Amen | dment, | Date o | of Origir | al File | d (Month/Da | ay/Yea | ar) | | . Indiv ine) X | Form | n filed by One n filed by Mor | o Filing (Check e Reporting Per re than One Re | son |
| | | Tabl | e I - No | on-Deriv | ative | Sec | uritie | s Ac | quire | d, Dis | sposed o | f, or | Ber | nefici | ally | Owne | ed | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day | | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Ins | | | | | l 5) Secur Benef | | cially 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) | Price | | Transaction(s) (Instr. 3 and 4) | | | (11131114) |
| Common Stock, par value \$0.10 per share 03/11/2 | | | 2014 | 014 | | | S | | 2,204 | | D | \$50.88(1) | | 53,067 | | D | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date Secution Day Month/Day/Year) 3A. Deemed Execution Day if any (Month/Day/Y | | on Date, | 4. Transaction Code (Instr. | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr and 4) | | f nstr. 3 nount | Deriv Secu | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Codo | | _{(^} , | (D) | Date | nabla | Expiration | Title | of | naraa | | | | - 1 | |

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$50.82 to \$51.09, 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 Gregory I. 03/14/2014 Poole

** Signature of Reporting Person Date

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.