FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287				
Estimated average b	urden				
hours per response:	0.5				

Instruction 1(b)	ly continue. See		d pursuant to Section 16(a) of the Securities Exchange Act of 1934									
	,		or Section 30(h) of the Investment Company Act of 1940	34 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) CHIEF OPERATING OFFICER 6. Individual or Joint/Group Filing (Check Applicable Line) X X Form filed by One Reporting Person Form filed by More than One Reporting Person								
1. Name and Addr Swan Leah	ress of Reporti	ng Person [*]	2. Issuer Name and Ticker or Trading Symbol <u>Childrens Place, Inc.</u> [PLCE]	(Check all applic Directo	able) r	10% Owner	,					
(Last) C/O THE CHI		(Middle) LACE, INC.	3. Date of Earliest Transaction (Month/Day/Year) 02/15/2022	below)	OPERATIN	,						
500 PLAZA D	RIVE		4 If Amendment, Date of Original Filed (Month/Dav/Year)	6 Individual or Joint/Group Filing (Check Applicable								
(Street) SECAUCUS NJ 07094		07094		Line) X Form fi Form fi	led by One Re led by More th	Reporting Person						
(City)	(State)	(Zip)										
		Table I - Non-De	2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer Childrens Place, Inc. [PLCE] 3. Date of Earliest Transaction (Month/Day/Year) 5. Relationship of Reporting Person(s) to Issuer 02/15/2022 CHIEF OPERATING OFFICER 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Form filed by More than One Reporting									

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Disposed Of 5)			Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock, par value \$0.10 per share	02/15/2022		F		2,523 ⁽¹⁾	D	\$70.55	76,500 ⁽²⁾	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 (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The shares were withheld to pay tax liabilities incident to the vesting of restricted stock units on February 15, 2022.

2. Includes dividend equivalent shares that have accrued thereon.

/s/ Jared Shure, as Attorney-In-Fact for Leah Swan

02/16/2022

** Signature of Reporting Person Date

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

 \ast 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.