FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

TATEMENT OF	CHANGES IN	BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response	: 0.5								

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

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* Frascotti John						2. Issuer Name and Ticker or Trading Symbol Childrens Place, Inc. [PLCE]							ck all app	,	ng Pers	10% Ov	vner			
(Last)	(Fir	est) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/05/2024								Office below	r (give title		Other (s below)	specify			
l		EN'S PLACE, IN	IC.		4. If <i>A</i>	If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
500 PLA	ZA DRIVE											1 1	X Form filed by One Reporting Person							
(Street)	CUS NJ	0	7094											Form filed by More than One Reporting Person						
-					Rul	Rule 10b5-1(c) Transaction Indication														
(City)	(St	ate) (Z	Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									nded to						
		Table	I - Non	n-Deriva	tive S	Secu	rities	s Acq	uired,	Dis	posed of	, or E	Bene	ficial	ly Own	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date.		Date,	Transaction Disposed C		es Acquired (A) Of (D) (Instr. 3, 4			Benefic	ies ially Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
			Code			v	Amount	(A) (D)	or I	Price	Transa	ection(s) 3 and 4)			(IIISU. 4)					
Common	Stock, par	value \$0.10 per s	share	02/05/2	/2024				A		6,980(1)	A		\$ <mark>0</mark>	0 13,125			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. Deer Execution if any (Month/I		4. Transaction Code (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		S (I	. Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y [1	10. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber						

Explanation of Responses:

1. Represent shares of common stock, par value \$0.10 per share, of The Children's Place, Inc. (the "Company"), underlying time restricted stock units granted under the Company's 2011 Equity Incentive Plan (the "Plan") on February 5, 2024. Such shares are deliverable to the reporting person on the first anniversary of the date of grant, subject to the terms and conditions of the Plan and the execution of the underlying stock award agreement. The stock award agreement for these shares were fully executed on February 15, 2024.

/s/ Jared Shure, as Attorneyin-Fact for John A. Frascotti

02/16/2024

** 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.