FORM 4

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPR	OVAL							
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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*     GRIFFIN BOBBY J				2. Issuer Name <b>and</b> Ticker or Trading Symbol Hanesbrands Inc. [ HBI ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner						
(Last) (First) (Middle) 1000 EAST HANES MILL ROAD						3. Date of Earliest Transaction (Month/Day/Year) 09/30/2020									er (give title		Other (s	· I	
(Street) WINSTON- SALEM NC 27105  (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
		Tab	le I - Non	-Deriv	ative	Se	curitie	s Ac	quired, I	Disp	osed o	of, or Be	neficia	lly Own	ed				
Dat			2. Transa Date (Month/D		ar)   i	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (II	Transaction Dispose Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3, 4		d Secur Benef Owne	cially I Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code V Amount (A) or (D)		r Price	Trans	Reported Transaction(s) (Instr. 3 and 4)			(111511.4)						
	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. Deemee Execution I if any (Month/Day	Date,	I. Fransaction Code (Instr. 3)				6. Date Exercisa Expiration Date (Month/Day/Yea		Amount of		f g Security	8. Price of Derivativ Security (Instr. 5)		e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares						
Phantom Stock <sup>(1)</sup>	(2)	09/30/2020			A		1,746		(3)		(3)	Common Stock	1,746	\$15.75	300,544	(4)	D		

## **Explanation of Responses:**

- 1. Represents a stock equivalent account (the "HBI Stock Fund") balance in the Hanesbrands Inc. Non-Employee Deferred Compensation Plan (the "Plan"). Balances in the HBI Stock Fund are settled on a share-for-share basis in shares of Hanesbrands Inc. common stock.
- 2. 1-for-1
- 3. Balances in the HBI Stock Fund are settled on a share-for-share basis in shares of Hanesbrands Inc. common stock (i) with respect to deferrals prior to January 1, 2008, at the time specified by the Reporting Person at the time of the Reporting Person's deferral election, which in no case shall be prior to the January 1 following the first anniversary of the date the deferral election is made and (ii) with respect to deferrals on or after January 1, 2008, on the earlier of the fifth anniversary of the date of the deferral or the Reporting Person's separation from service as a member of the Hanesbrands Inc. Board of Directors.
- 4. Includes acquisition of 2,856 phantom stock units acquired through deemed dividend reinvestment on September 1, 2020.

## Remarks:

Joia M. Johnson, attorney-in-

fact

\*\* Signature of Reporting Person

10/01/2020

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.