FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

illington, D.C. 20549	OMB APPROVAL

- 1										
	OMB Number:	3235-0287								
-	1									
	Estimated average burden									
- 1	hours nor rosponso:	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*     Evans Gerald						2. Issuer Name <b>and</b> Ticker or Trading Symbol Hanesbrands Inc. [ HBI ]									tionship o all applica Director	•				
(Last) (First) (Middle) 1000 EAST HANES MILL ROAD						3. Date of Earliest Transaction (Month/Day/Year) 03/14/2017								X	below)	give title	e Other (spec below) ecutive Officer		pecify	
(Street) WINSTON- SALEM NC 27105					4.	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						
(City)	(S	tate)	(Zip)		_										Person					
		Та	ble I - No	on-Der	ivativ	ve Se	ecuri	ities Ac	quired	l, Dis	sposed o	f, or Be	nefici	ally (	Owned					
Date			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			d 5)	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reported Transacti	eported ransaction(s) nstr. 3 and 4)			(Instr. 4)	
Common Stock				03/14/2017		7			<b>M</b> <sup>(1)</sup>		113,475	5 A	\$6	.28	1,06	1,098		D		
Common Stock				03/14/2017		7			<b>F</b> <sup>(2)</sup>		72,442	D	\$20.	<b>22</b> <sup>(2)</sup>	988	,656		D		
Common	on Stock			03/1	03/15/2017				S <sup>(1)</sup>		41,033	D	\$20	).26	947	7,623		D		
Common Stock															1:	17		I	By 401(k) olan	
			Table II								oosed of, converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		Derivative		6. Date Exerci Expiration Dat (Month/Day/Ye		te	7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		5	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	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 Exercisa	able	Expiration Date	Title	Amour or Number of Sha	er	(Instr. 4)					
Employee Stock Option (right to	\$6.28	03/14/2017			M <sup>(1)</sup>			113,475	(3)		02/04/2018	Common Stock	113,4	75	\$6.28	226,94	19	D		

## Explanation of Responses:

- 1. The option exercise and sale reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on February 6, 2017.
- 2. Represents a "net exercise" of outstanding stock options. These shares were withheld by Hanesbrands Inc. for payment of the exercise price and applicable taxes, based on the market price of Hanesbrands Inc. common stock at the time of the option exercise on March 14, 2017 of \$20.22.
- 3. The options vest in three installments of 33% on February 4, 2009, 33% on February 4, 2010 and 34% on February 4, 2011.

## Remarks:

Joia M. Johnson, attorney-in-

03/16/2017

\*\* 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.