## FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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*     Mathews Jessica Tuchman					2. Issuer Name and Ticker or Trading Symbol Hanesbrands Inc. [ HBI ]									5. Relationshi (Check all app X Direc		plicable)		Person(s) to Issuer  10% Owner		
(Last) 1000 EA	,	rst) (	(Middle)		3. Date of Earliest Transa 12/28/2016				action (M	ction (Month/Day/Year)							cer (give title bw)		Other (specify below)	
(Street) WINSTO	N		27105 (Zip)		4. If	Ame	endment,	Date o	f Original	Filed	(Month/Da	ay/Ye	ar)		6. Indiv Line) X	Forn	r Joint/Group n filed by One n filed by Mor on	e Re <sub>l</sub>	porting Pers	on
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Dat			2. Trans Date (Month/I	saction /Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 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)		Pric	e		action(s) 3 and 4)			(Instr. 4)
Common	Stock			12/28	3/2016	6			J <sup>(1)</sup>		2,096	5	D	9,	\$ <del>0</del>		0		I	Through trust <sup>(1)</sup>
Common	Stock															12	29,291		D	
Common	Stock															2	2,096		Ι	Through trust <sup>(2)</sup>
Common Stock												15,800		5,800		I	By spouse			
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. Deem Execution if any (Month/Da	on Date, Tra Coo Day/Year) 8)		ction Instr.	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E: Expiration (Month/D: Date	n Date	ear)	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Number of Title Shares		ount nber	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

- 1. The reporting person is trustee of the Mathews Children's Trust DTD 7/24/1997 FBO Oliver M. Tuchman Mathews, of which her son is the beneficiary. On December 28, 2016, the reporting person caused the trust to distribute 2,096 shares of Hanesbrands common stock to beneficiary of the trust. The reporting person disclaims beneficial ownership of the securities held by the trust except to the extent of her pecuniary interest therein.
- 2. The reporting person is trustee of the Mathews Children's Trust DTD 7/24/1997 FBO Jordan Henry M. Mathews, of which her son is the beneficiary. The reporting person disclaims beneficial ownership of the securities held by the trust except to the extent of her pecuniary interest therein.

## Remarks:

Joia M. Johnson, attorney-in-

03/28/2017

\*\* 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.