## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [	D.C. 20549
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<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

	OMB APPR	ROVAL						
	OMB Number:	3235-0287						
l	Estimated average burden							
ı	hours ner resnonse:	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

1. Name and Address of Reporting Person*  MULCAHY J PATRICK					2. Issuer Name and Ticker or Trading Symbol Hanesbrands Inc. [ HBI ]									applio recto	cable) or	g Pers	son(s) to Iss	vner		
(Last) (First) (Middle) 1000 EAST HANES MILL ROAD					3. Date of Earliest Transaction (Month/Day/Year) 03/31/2015									fficer elow)	(give title		Other (s below)	specify		
(Street) WINSTO	N(	_	27105 (Zip)		4. 11	f Ame	endment,	lment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - Noi	n-Deriv	/ative	Se	curities	s Ac	quired, D	isp	osed o	f, or Be	neficia	ly Ow	nec	I				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					ar)	Execution if any	A. Deemed xecution Date, any //onth/Day/Year)		Transaction Dispose Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3, 4		4 and Securiti Benefic		es ally Following	Form	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	,	Amount	(A) oi (D)	Price	Tra	ransaction(s) Instr. 3 and 4)					
		ī							uired, Dis , options	•				own	ed					
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/Da	Date,	4. Transa Code ( 8)				6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)				9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
Code V (A) (D)					(D)	Date Exercisable		kpiration ate	Title	Amount or Number of Shares										
Phantom Stock <sup>(1)</sup>	(2)	03/31/2015			A		671 <sup>(3)</sup>		(4)		(4)	Common Stock	671	\$33.5	L <sup>(3)</sup>	217,452	(5)	D		

## **Explanation of Responses:**

- 1. Represents a Stock Equivalent Account balance under the Hanesbrands Inc. Non-Employee Director Deferred Compensation Plan (the "Plan"). Balances in the Stock Equivalent Account may not be reallocated and are settled on a share-for-share basis of Hanesbrands Inc. common stock.
- 3. Represents a deferral by the Reporting Person to a Stock Equivalent Account balance under the Plan, as determined by dividing the dollar amount of the deferral by \$33.51 (the closing market quote for Hanesbrands Inc. common stock on March 31, 2015).
- 4. Balances in the Stock Equivalent Account are settled on a share-for-share basis 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.
- 5. Includes 168 phantom stock units acquired through deemed dividend reinvestment on March 3, 2015 and 162.586 phantom stock units acquired as a result of Hanesbrands' 4-for-1 stock split on March 3, 2015.

## Remarks:

Joia M. Johnson, attorney-in-

04/02/2015

fact

\*\* 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.