		Tab	ple II - D	erivative Sec	curities Acqui	Code	v Disno	Amount	(D	·	Price	Transac (Instr. 3					
1. Title of Security (Instr. 3) 2. Transa Date (Month/L					2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		(A) or 3, 4 and	- Reporte	es ially Following d	Form (D) o	vnership 1: Direct r Indirect 1str. 4)	7. Nature of Indire Beneficia Ownersh (Instr. 4)		
		Table	I - Non-	Derivative S	ecurities Acq	uired,	Disp	osed o	f, or E	Bene	ficially	v Owne	d				
(City) (State) (Zip)																	
SALEM NC 27105												X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(Last) (First) (Middle) 1000 E HANES MILL ROAD (Street) WINSTON				4. If An	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
												Group Pres., Global Activewear					
					3. Date of Earliest Transaction (Month/Day/Year)								X Officer (give title Other (specificer) below)				
1. Name and Address of Reporting Person [*] Ram Jonathan					2. Issuer Name and Ticker or Trading Symbol Hanesbrands Inc. [HBI]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
Section 16. Fo obligations ma Instruction 1(b)	y continue. See	Filed pursuar or Sec	d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									hours per response:					
Check this box	if no longer subject	ct to	STATE		IENT OF CHANGES IN BENEFICIAL OWNE							HIP		OMB Number: 3235-02 Estimated average burden			
					Washington, D.C. 20549									OMB APPROVAL			

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Phantom Stock ⁽¹⁾	(1)	05/15/2020		Ι			2,431	(2)	(2)	Common Stock	2,431	\$8.52	116	D	

Explanation of Responses:

1. Represents a hypothetical investment in Hanesbrands Inc. common stock under the Hanesbrands Inc. Supplemental Employee Retirement Plan (the "Plan"). Following the Reporting Person's retirement or other termination of employment from Hanesbrands Inc. or as otherwise permitted under the terms of the Plan, balances in the Plan are settled in cash based on the value of Hanesbrands Inc. common stock on the applicable valuation dates determined under the terms of the Plan. The number of share equivalents shown is an estimate because the Reporting Person's interest in the Plan is denominated in units. 2. Following the Reporting Person's retirement or other termination of employment from Hanesbrands Inc. or as otherwise permitted under the terms of the Plan, balances in the Plan are settled in cash based on the value of Hanesbrands Inc. common stock on the applicable valuation dates determined under the terms of the Plan.

Remarks:

/s/ Joia M. Johnson, attorney in 05/19/2020

<u>fact</u>

** 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.

B APPROVAL 3235-0287 ber: average burden 0.5 response:

> > 7. Nature of Indirect Beneficial

Ownership