FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C. 20549
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

ı	OMB APPRO	OVAL						
	OMB Number:	3235-0287						
l	Estimated average burden							
ı	hours por 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

1. Name and Address of Reporting Person*												5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
MULCAHY J PATRICK													X	Directo	or		10% Ov	/ner		
(Last) 1000 EA	`	rst) ((Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/31/2016									Officer below)	(give title		Other (s below)	pecify	
(Street) WINSTO	N(27105 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Indiv ne) X	· I					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Trans: Date (Month/L				Execution Date,			3. Transaction Code (Instr. 5) 3. Use of the description of the descr			4 and Securiti		es For ially (D) Following (I) (: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code V		Amount	(A) or (D) Prid		:	Transaction(s) (Instr. 3 and 4)				(matt. 4)		
		ī							uired, Dis , options						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/Da	Date,	4. Transa Code (I 8)		ı of		6. Date Exercisa Expiration Date (Month/Day/Yea		Amount of		f g Security	De Se (Ir	Price of erivative ecurity 1str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly D	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisable		piration ate	Title	Amount or Number of Shares							
Phantom Stock ⁽¹⁾	(2)	03/31/2016			A		838 ⁽³⁾		(4)		(4)	Common Stock	838	\$	28.34 ⁽³⁾	194,664	(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 \$28.34 (the closing market quote for Hanesbrands Inc. common stock on March 31, 2016).
- 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 acquisition of 742 phantom stock units acquired through deemed dividend reinvestment on March 8, 2016.

Remarks:

Joia M. Johnson, attorney-in-

04/04/2016

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.