FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
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	Check this box if no longer subject to
\neg	Section 16. Form 4 or Form 5
J	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

		*			2 10	cuor	Namo a	nd Tiek	or or Tra	dina	Symbol			T_5	Pola	tionchi	n of Poportin	a Porcon(c) to I	ccuor		
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol Hanesbrands Inc. [HBI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Boyles Dale W						Trancoorando IIIC. [IIDI]										Direc			Owner		
															X	Office	er (give title	Other below	(specify		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 12/09/2008									VP, Controller, CAO						
1000 EAST HANES MILL ROAD					12/	12/09/2000									VI, Controller, C/10						
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
WINSTO	N- N	7	27105												X	Form filed by One Reporting Person					
SALEM	111	.C 2/105													Λ						
,					-											Pers		e than One Re	Jording		
(City)	(SI	ate) (Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of S	Security (Inst	r. 3)		2. Trans	action					3. 4. Securities Acquired (A)							ount of	6. Ownership	7. Nature		
				Date (Month/I	Day/Yea				Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)			3, 4 ar	Benefi		icially (D	Form: Direct (D) or Indirect	of Indirect Beneficial				
						(Month/Day/Year)								Owned Follow Reported		ted	(I) (Instr. 4)	Ownership (Instr. 4)			
						Code	v	Amount		(A) or (D)	Price	,	Transaction(s) (Instr. 3 and 4)								
Common Stock 12/09/2						/2008			A		13,515	5 ⁽¹⁾ A \$0		\$0.	0.00 41,175		1,175	D			
		Т-	blo II - I	Dorivot	ivo C	2011	rition	A 0011	irod D	ione	and of	or P	onofi	المند	· · · ·	upod					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of	2.	3. Transaction	3A. Deem	Date, Trai	4.		5. Number		6. Date Exercisable and			7. Title and			8. Price of		9. Number o		11. Nature		
Derivative Security	Conversion or Exercise		Execution if any		Transa Code (Expiration (Month/D						Derivative Security		derivative Securities	Ownership Form:	of Indirect Beneficial		
(Instr. 3)	Price of Derivative		(Month/Day/Year		8)		Securities Acquired		Underlyin Derivative						(Inst	r. 5)	Beneficially Owned	Direct (D) or Indirect	Ownership (Instr. 4)		
	Security						(A) or Disposed		Security (Instr. and 4)					str. 3	3		Following Reported	(I) (Instr. 4)	,		
						of (D)		anu 4)							Transaction	(s)					
							(Instr. 3, 4 and 5)										(Instr. 4)				
									Amount		ount										
								.					or Numbe								
				Code V						Expiration Date	of Title Shares		res								

Explanation of Responses:

1. Consists of restricted stock units that upon vesting are settled on a one-for-one basis in shares of common stock, vesting in three installments of 33% on December 9, 2009, 33% on December 9, 2010 and 34% on December 9, 2011.

Remarks:

Catherine A. Meeker, Attorney 12/11/2008 in 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.