FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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	Check this box if no longer subject
$\overline{}$	to Section 16. Form 4 or Form 5
\cup	obligations may continue. See
	Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>Lewis Markland Scott</u>					2. Issuer Name and Ticker or Trading Symbol Hanesbrands Inc. [HBI]									(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (cnecify)				
(Last) 1000 EA	•	(First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/10/2023									2	X Officer (give title below) Other (specify below) See Remarks				
(Street) WINSTON- SALEM NC 27105			4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	ate) (Z	Zip)	-	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See										truction or wi	ritten p	llan that is int	ended to	
		Table	l - No	n-Deriva	tive S	ecui	rities	Acq	uired,	Dis	posed of	, or	Ben	eficia	lly Owr	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)			Execution Date,			Oate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (ADisposed Of (D) (Instr. 35)				Securi Benefi Owned	icially d ving	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	Amount	(A (D	() or ()	Price	Reported Transaction(s) (Instr. 3 and 4)							
Common	Stock			07/10/2	023				A		64,845 ⁽¹⁾ A		A	\$ <mark>0</mark>	18	184,809		D	
Common Stock														2,075			I	By 401(k) plan	
		Tab	le II -	Derivativ (e.g., pu											y Owne	ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed tion Date, h/Day/Year)	4. Transac Code (I 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date I Expirati (Month/I	on Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		d 4)	Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
						Code V (A) (D)		Date Exercisa	able	Expiration le Date		Amo or Num of Sha	ber						

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 July 10, 2024, 33% on July 10, 2025 and 34% on July 10, 2024, 33% on July 10, 2024, 33% on July 10, 2025 and 34% on July 10, 2024, 33% on July 10, 2024, 33% on July 10, 2025 and 34% on July 10, 2024, 33% on July 10, 2024, 33% on July 10, 2025 and 34% on July 10, 2024, 33% on July 10, 2025 and 34% on July 10, 2024, 33% on July 10, 2025 and 34% on July 10, 2024, 33% on July 10, 2025 and 34% on July 10, 2024, 33% on July 10, 2025 and 34% on July 10, 2024, 33% on July 10, 2025 and 34% on July 10, 2024, 33% on July 10, 2025 and 34% onon July 10, 2026.

Chief Financial Officer & Chief Accounting Officer

/s/ Tracy M. Preston, attorney 07/12/2023 in fact

** Signature of Reporting Person

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.