FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasilington,	D. C.	20343

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average	Estimated average hurden								

0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(h)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

hours per response: or Section 30(h) of the Investment Company Act of 1940

1. Name ar		Reporting Person*					r Name an s <mark>brands</mark>				ymbol		(Ch	Relationship of eck all applications	cable) r	g Pers	son(s) to Iss 10% Ov Other (s	vner
(Last) 1000 EA	,	irst) S MILL ROAD	(Middle)		3. Date of Earliest Transaction (Month/) 08/31/2007						ay/Year)			X Officer (give title Other (spec below) below) EVP Human Resources				
(Street) WINSTO	ON- N	С	27105		4.								Line	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)											7 61301	•			
		Tal	ole I - Nor	n-Deri	vativ	re Se	curities	Acc	uired,	Disp	osed o	f, or Be	neficiall	y Owned				
1. Title of Security (Instr. 3)		Date	ransaction e enth/Day/Year)		Execution Date,		Code (Instr. 5)					6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	(A) or (D)	Price	Transact	Transaction(s) (Instr. 3 and 4)			(instr. 4)	
Common Stock			08/3	31/200	/2007		D		3,995	D	(1)	36,	36,923		D			
Common Stock													7,8	328		I	By 401(K) plan	
Common Stock										1	150			Held by son				
			Table II -				urities <i>l</i> ls, warra							Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Execute (Month/Day/Year) if any	3A. Deemed Execution E if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		Derivative I		6. Date Exercisa Expiration Date (Month/Day/Yea		e Amount of		of s ig e Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			
Phantom Stock ⁽²⁾	(3)	08/31/2007			A		3,995 ⁽¹⁾		(4)		(4)	Common Stock	3,995	\$29.46 ⁽¹⁾	3,995	5	D	

Explanation of Responses:

- 1. Represents a deferral by the Reporting Person of 3,995 shares of Hanesbrands Inc. common stock upon the vesting of restricted stock units granted to the Reporting Person on September 26, 2006. The amount deferred was contributed to a Stock Equivalent Account balance under the Hanesbrands Inc. Executive Deferred Compensation Plan (the "Plan").
- 2. Represents a Stock Equivalent Account balance under 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. 1-for-1

4. Balances in the Stock Equivalent Account are settled on a share-for-share basis of Hanesbrands Inc. common stock 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.

Remarks:

Catherine A. Meeker, Attorney in fact

09/05/2007

** 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.