FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES	S IN BENEFICIAL	. OWNERSHIP

l	OMB APPRO)VAL					
	OMB Number:	3235-0287					
l	Estimated average burden						
l	hours per response:	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* WYATT E LEE				2. Issuer Name and Ticker or Trading Symbol Hanesbrands Inc. [HBI]						(Ch	eck all applic	cable)	Person(s) to Iss 10% O Other (vner	
(Last) (First) (Middle) 1000 EAST HANES MILL ROAD				3. Date of Earliest Transaction (Month/Day/Year) 05/31/2007						X below)		below)			
(Street) WINSTO	ON- NO	C :	27105	4. 1	f Amer	ndment,	Date	of Original Fil	ed (Month/D	ay/Year)	Line	e) <mark>X</mark> Form f	iled by One Riled by More	iling (Check Ap Reporting Perso than One Repo	n
(City)	(S	tate) (Zip)												
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date		Code (Instr. 5)			Benefici	es Formially (D) (Following (I) (I	. Ownership form: Direct D) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code V	Amount	(A) o	Price	Transac (Instr. 3	tion(s)		, ,
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
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)	Code	Transaction Code (Instr.		tive ties ed sed	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)	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⁾	(2)	05/31/2007		A		580 ⁽³⁾		(4)	(4)	Common Stock	580	\$25.83 ⁽³⁾	11,367	D	

Explanation of Responses:

- 1. Represents a Stock Equivalent Account Balance under the Hanesbrands Inc. Executive 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 at the time specified by the Reporting Person at the time of his deferral election.
- 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 \$25.83 (the average of the high and low market quotes for Hanesbrands Inc. common stock on May 31, 2007).
- 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 his deferral election, which in no case shall be prior to the January 1 following the first anniversary of the date the deferral election was made.

Remarks:

Catherine A. Meeker, Attorney-06/04/2007 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.