FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPI | ROVAL |
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| OMB Number: | 3235-028 |

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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

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|--------------------------|-----------|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | |
| Estimated average burden | | | | | | |
| hours per response: | 0.5 | | | | | |

| 1. Name and Address of Reporting Person* CHADEN LEE A | | | | | 2. Issuer Name and Ticker or Trading Symbol Hanesbrands Inc. [HBI] | | | | | | | | | | all app | licable) | ′ | | | |
|---|--|---|-------|------|---|---|---|------------------------------------|--------------------------------------|---|--------------------|---|--------|----------------------|-----------|---|---|---|---------------------------------------|---|
| (Last) (First) (Middle) 1000 EAST HANES MILL ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/10/2009 | | | | | | | | | Λ | Office | Director Officer (give title below) | | 10% Owner Other (specify below) | |
| (Street) WINSTO | N(| | 27105 | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Indivine) | dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans: Date (Month/L | | | | | | ar) i | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | Disposed | urities Acquired (A) sed Of (D) (Instr. 3, | | | | 5. Amount of Securities Beneficially Owned Following Reported | | 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 | | Transa | ction(s) 3 and 4) | | | | | | |
| Common | Stock | Stock 02/10/2009 F 3,883 ⁽¹⁾ D \$8.05 78,813 D | | | | | |) | | | | | | | | | | | | |
| | 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 2. Conversion of Date (Month/Day/Year) 3. Transaction Date Execution Date, if any (Month/Day/Year) | | | | | ransaction of code (Instr. De) Se Ad (A Di of | | osed . 3, 4 | 6. Date E Expiratio (Month/D | n Dat | e Amou ar) Securi Under Deriva | | Amount | | _ | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | m: ect (D) ndirect | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | | | Expiration Date | Numbe of Title Shares | | | | | | | | |

Explanation of Responses:

1. Represents shares of common stock withheld to pay taxes upon vesting of restricted stock units originally granted to the Reporting Person on February 5, 2007. The number of shares withheld was determined on February 10, 2009 based on the closing price of Hanesbrands Inc. common stock on February 5, 2009.

Remarks:

Catherine A. Meeker, Attorney in fact

02/12/2009

** 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.