FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washi

wasnington, D.C. 20549	OMB APP	ROVAL
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-

- 1										
	OMB Number:	3235-0287								
	Estimated average burden									
ı	hours por rosponso:	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*  NOLL RICHARD A					2. Issuer Name and Ticker or Trading Symbol Hanesbrands Inc. [ HBI ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
						<u> </u>	1110	<u>.</u> [ 1121 ]	1				X	Directo	r		10% Ow	ner		
(Last) (First) (Middle) 1000 EAST HANES MILL ROAD						3. Date of Earliest Transaction (Month/Day/Year) 12/08/2016									Officer below)	(give title		Other (s below)	pecify	
(Street) WINST(	ON- NO	C	27105				4. If Amendment, Date of Original Filed (Month/Day/Year)								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)	(Zip)																	
		Tab	le I - Non	-Deriv	ativ	e Se	curities	s Ac	quired,	Dis	posed o	of, or Be	enefic	cially	y Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Da		Date,	Code (Ins					, 4 and Securitie Benefici Owned F		es F ally (I Following (I	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) (D)	or Pr	ice	Transact (Instr. 3 a	tion(s)			(Instr. 4)		
Common Stock 12/08/					8/201	.6			D		43,71	.5 D		(1) 82		,362		D		
		7	Гable II - I (						uired, D , option						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Transact Code (In:					6. Date Ex Expiration (Month/Da	Date		nd 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)		Ow For Ily Dire or I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amo or Num of Shar	ber						
Phantom Stock <sup>(2)</sup>	(3)	12/08/2016			A		43,715		(4)		(4)	Common Stock	43,7	715	(1)	291,740	(5)	D		

## **Explanation of Responses:**

- 1. Represents a deferral by the Reporting Person of 43,715 shares of Hanesbrands Inc. common stock upon the vesting of restricted stock units granted to the Reporting Person on December 8, 2015. The amount deferred was contributed to a stock equivalent account (the "HBI Stock Fund") in the Hanesbrands Inc. Executive Deferred Compensation Plan (the "Plan").
- 2. Represents an HBI Stock Fund balance under the Plan. Balances in the HBI Stock Fund are settled on a share-for-share basis of Hanesbrands Inc. common stock.
- 4. Balances in the HBI Stock Fund are settled on a share-for-share basis in 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.
- 5. Includes acquisitions of 937.982, 992.608, 1,032.404 and 1,187.761 phantom stock units through deemed dividend reinvestment on March 8, 2016, June 7, 2016, September 7, 2016 and December 6, 2016, respectively.

## Remarks:

Joia M. Johnson, attorney-in-

12/12/2016

\*\* 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.