FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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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>CHADEN LEE A</u>				2. Issuer Name and Ticker or Trading Symbol Hanesbrands Inc. [HBI]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
				carco	<u> </u>		<u>e.</u> []				X	Directo	or		10% Ow	ner	
(Last) (First) (Middle) 1000 EAST HANES MILL ROAD					3. Date of Earliest Transaction (Month/Day/Year) 03/04/2008								Officer below)	er (give title v)		Other (sp below)	pecify
(Street) WINSTO	ON- N	C :	27105	4.	If Amer	ndment,	Date	of Original Fil	ed (Month/E	Day/Year)		Individue) X	Form f	Joint/Group iled by One iled by More	Report	ting Persor	1
(City)	(S	tate) ((Zip)														
		Tab	le I - Non-D	erivativ	e Sec	uritie	s Ac	quired, D	isposed	of, or Be	eneficia	lly C	wnec	ı			
Date				Transaction te onth/Day/Ye	ear) E	A. Deemed xecution Date, any //onth/Day/Year		Code (Instr. 5)		red (A) or str. 3, 4 ar	4 and Securit Benefic Owned		es ally Following	6. Owne Form: E (D) or Ir (I) (Insti	Direct ondirect Br. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code V	Amount	(A) o	(A) or (D) Price			ed ction(s) 3 and 4)				
	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 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form Direct or Ind (I) (In	wnership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	1					
Phantom Stock ⁽¹⁾	(1)	03/04/2008		A		8,780		(2)	(2)	Common Stock	8,780	\$27	7.78 ⁽³⁾	42,053		D	

Explanation of Responses:

- 1. Represents a hypothetical investment in Hanesbrands Inc. common stock under the Hanesbrands Inc. Supplemental Employee Retirement Plan (the "Plan"). Following the reporting person's retirement or other termination of employment from Hanesbrands Inc., balances in the Plan are settled in cash based on the value of Hanesbrands Inc. common stock on the applicable distribution dates determined under the terms of the Plan. The number of share equivalents shown is an estimate because the reporting person's interest in the Plan is denominated in units.
- 2. Following the reporting person's retirement or other termination of employment from Hanesbrands Inc., balances in the Plan are settled in cash based on the value of Hanesbrands Inc. common stock on the applicable distribution dates determined under the terms of the Plan.
- 3. The number of share equivalents reported was determined by dividing the dollar amount credited to the reporting person's account by \$27.78 (the closing price for Hanesbrands Inc. common stock on the allocation date of March 4, 2008).

Remarks:

Catherine A. Meeker, 03/06/2008 Attorney-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.