FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

	OMB Number:	3235-0287								
ı	Estimated average burden									
ı	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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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>Boyles Dale W</u>							2. Issuer Name and Ticker or Trading Symbol Hanesbrands Inc. [HBI]									able) r	g Pers	on(s) to Issi 10% Ov Other (s	vner	
(Last) (First) (Middle) 1000 EAST HANES MILL ROAD						3. Date of Earliest Transaction (Month/Day/Year) 02/04/2008								7	below)				яреспу 	
(Street) WINSTON- SALEM (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. In Line) K Form fil	Form filed by More than One Reporting				
		Tab	le I - Nor	n-Deri	vativ	e Se	curities	Acc	quired, I	Disp	osed o	f, or B	enef	icially	/ Owned					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,			3. Transaction Code (Instr. 3, 4) 5) 8)					es Formally (D) (Following (I) (I		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	or F	Price	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)	
Common Stock 02/04/						/2008		A		4,781	1) A		\$0.00	31,	,996		D			
Common Stock 02/05/)5/200	/2008		D		1,774	2) [(2) 30		0,222		D			
		-	Table II -								osed of, onvertib				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 Date, if any (Month/Day/Year	Date,	Code (Instr.				6. Date Exercisa Expiration Date (Month/Day/Yea		e Amount of			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	is illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	or Nu of	ımber		(Instr. 4)	on(a)			
Phantom Stock ⁽³⁾	(4)	02/05/2008			A		1,774 ⁽²⁾		(5)		(5)	Commo Stock	1 1	,774	\$23.55 ⁽²⁾	1,861	.	D		

Explanation of Responses:

- 1. Consists of restricted stock units that upon vesting are settled on a one-for-one basis in shares of common stock, vesting in three installments of 33% on February 4, 2009, 33% on February 4, 2010 and 34% on February 4, 2011.
- 2. Represents a deferral by the Reporting Person of 1,774 shares of Hanesbrands Inc. common stock upon the vesting of restricted stock units granted to the Reporting Person on February 5, 2007. The amount deferred was contributed to a Stock Equivalent Account balance under the Hanesbrands Inc. Executive Deferred Compensation Plan (the "Plan").
- 3. 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.
- 5. 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:

<u>Catherine A. Meeker, Attorney</u> in fact

02/06/2008

** Si

** 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.