FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ı	OMB APPROVAL									
	OMB Number:	3235-0287								
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0.5

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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(h)

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* MULCAHY J PATRICK						2. Issuer Name and Ticker or Trading Symbol Hanesbrands Inc. [HBI]								Relationship neck all appli X Direct	cable) or	g Pers	10% Ov	vner
(Last) (First) (Middle) 1000 EAST HANES MILL ROAD					Date o	of Earliest 1	Transa	action (Mo	onth/E	Day/Year)		Officer below)	(give title		Other (s below)	specify		
(Street) WINSTON- SALEM NC 27105				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable te) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)															
		Tak	ole I - Nor	ı-Deri	vativ	e Se	curities	Acq	uired,	Dis	posed o	f, or Be	neficia	ly Owned	l			
1. Title of Security (Instr. 3) 2. Transar Date (Month/Da						Execution Da		Date,	3. Transa Code (I 8)					Securition Benefici	. Amount of ecurities eneficially when the following		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) o (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock 12/04/)4/201	/2013		D		3,343(1	(1) D		10	10,000		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 D if any (Month/Day)	Date,	4. Transa Code (8)				6. Date Exercis Expiration Date (Month/Day/Ye		е	7. Title ar Amount of Securitie Underlyin Derivativ (Instr. 3 a	of s ng e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	e C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A) (D		Date Exercisal		Expiration Date	Title	Amoun or Numbe of Shares		(Instr. 4)	,ii(3)		
Phantom Stock ⁽²⁾	(3)	12/04/2013			A		3,343 ⁽¹⁾		(4)		(4)	Common Stock	3,343	(1)	49,90)2	D	

Explanation of Responses:

- 1. Represents a deferral by the Reporting Person of 3,343 shares of Hanesbrands Inc. common stock upon the vesting of restricted stock units granted to the Reporting Person on December 4, 2012. The amount deferred was contributed to a Stock Equivalent Account balance under the Hanesbrands Inc. Non-Employee Director Deferred Compensation Plan (the "Plan").
- 2. 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. 3. 1-for-1
- 4. Balances in the Stock Equivalent Account are settled on a share-for-share basis of Hanesbrands Inc. common stock (i) with respect to deferrals prior to January 1, 2008, 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 and (ii) with respect to deferrals on or after January 1, 2008, on the earlier of the fifth anniversary of the date of the deferral or the Reporting Person's separation from service as a member of the Hanesbrands Inc. Board of Directors.

Remarks:

Joia M. Johnson, attorney in fact 12/06/2013

** 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.