FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OIVID APPROVAL									
OMB Number:	3235-028								
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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(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* MOSS RICHARD D						2. Issuer Name and Ticker or Trading Symbol Hanesbrands Inc. [HBI]									elationship o ck all applica Director	ıble)	g Perso	on(s) to Issu 10% Ow Other (s	Owner	
(Last) (First) (Middle) 1000 E. HANES MILL ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/10/2017									below)	nief Finar	ncial (below)	респу	
(Street) WINSTO	WINSTON- NC 27105					4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)												Person					
		Ta	ble I - No	n-Deriv	vativ	/e Se	ecuri	ities Ac	quired	, Dis	posed o	of, or B	enef	icially	Owned					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ay/Year) Execution		ution Date,	Code	Transaction Disposed Code (Instr.					Beneficia Owned Fe	s Ily ollowing	Form	: Direct I Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or I	Price	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)	
Common Stock 05/10					0/201	/2017		М		101,00	07 <i>A</i>		(1) 31		0,142		D			
Common Stock 05/10					0/201)/2017			F ⁽²⁾		45,65	5 Г)	\$ <mark>21.8</mark> 1	264,487		D			
			Table II -								osed of converti				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)	ate, T	4. Transaction Code (Instr.		Derivative		6. Date I Expiration (Month/I	on Dat		7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				c	code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nu	ount mber Shares		Transaction(s) (Instr. 4)				
Phantom Stock ⁽³⁾	(4)	05/10/2017			M			101,007	(5)		(5)	Common	10	1,007	(1)	34,23	1	D		

Explanation of Responses:

- 1. Represents a distribution to the Reporting Person of 101,007 shares of Hanesbrands Inc. common stock in settlement of an equal number of shares of phantom stock held in a stock equivalent account (the "HBI Stock Fund") in the Hanesbrands Inc. Executive Deferred Compensation Plan.
- 2. Represents shares of common stock withheld to pay taxes upon the distribution of shares of Hanesbrands Inc. common stock from the Plan.
- 3. Represents an HBI Stock Fund balance under the Plan. Balances in the HBI Stock Fund are settled on a share-for-share basis in shares of Hanesbrands Inc. common stock.

Remarks:

5. Balances in the HBI Stock Fund are settled on a share-for-share basis in shares of Hanesbrands Inc. common stock at the time specified by the Reporting Person at the time of the Reporting Person's deferralelection, which in no case shall be prior to the January 1 following the first anniversary of the date the deferral election is made.

Joia M. Johnson, attorney-in**fact**

** Signature of Reporting Person

Date

05/11/2017

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.