Edgar Filing: Hanesbrands Inc. - Form 4

Hanesbrands	s Inc.											
Form 4												
December 1	1, 2013											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB	3235-0287			
Check th	is hox		Was	shington,	D.C. 20	549			Number:			
if no long	oer.			CEC DI					Expires:	January 31, 2005		
subject to		MENT O	F CHAN			CIA		NERSHIP OF	Estimated a			
Section 1				SECUR	ITIES				burden hou	rs per		
Form 4 o Form 5			a		a .				response 0.			
obligatio	n o *						•	e Act of 1934,				
may cont				•	•	· ·		f 1935 or Section	1			
See Instru	uction	30(n)	of the In	vestment	Compan	y Ac	t of 194	HU				
1(b).												
(Print or Type I	Responses)											
× 51	1 /											
Ryan Michael S. Symbol				r Name and Ticker or Trading 5. R			5. Relationship of Reporting Person(s) to					
				mbol anesbrands Inc. [HBI]				Issuer				
								(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction			(Chec.	к ан аррисабіе	:)		
(Month/E				Ionth/Day/Year)			Director	10%	Owner			
			2/09/2013				X Officer (give title Other (speci below) below)					
								· · · · · · · · · · · · · · · · · · ·	coller and CAO	1		
	(Street)		4 If Ame	ndment Da	te Origina			6 Individual or Io	int/Group Filin	or (Check		
				If Amendment, Date Original led(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
			violativ Day, i car)				_X_ Form filed by One Reporting Person					
WINSTON	SALEM, NC 2	7105						Form filed by M	lore than One Re	porting		
								Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Da	ate 2A. Deer	med	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Yea	 r) Executio any 	tion Date, if Transaction(A) or Disposed of (D)					Securities	Form: Direct			
(Instr. 3)		Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)				5)	•	(D) or Indirect (I)	Beneficial Ownership			
		(within)	Day/Ical)	(111501.0)				Following	(Instr. 4)	(Instr. 4)		
						(\mathbf{A})		Reported	. ,	. ,		
						(A) or		Transaction(s)				
				Code V	Amount		Price	(Instr. 3 and 4)				
Common	12/09/2013			F	307 <u>(1)</u>	D	\$	12,244	D			
Stock	12/07/2015			-	<i>507 <u></u></i>	D	69.79	12,211	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Ryan Michael S. 1000 EAST HANES MILL ROAD WINSTON SALEM, NC 27105			Controller and CAO				
Signatures							

Joia M. Johnson, attorney 12/11/2013 in fact

<u>**</u>Signature of Reporting Person

Date

Explanation of Responses:

* 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).

Represents shares of common stock withheld to pay taxes upon vesting of restricted stock units originally granted to the Reporting Person(1) on December 4, 2012. The number of shares withheld was determined on December 9, 2013 based on the closing price of Hanesbrands Inc. common stock on December 4, 2013.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.