

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2024 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2024 or fiscal plan year beginning 12/01/2024 and ending 11/30/2025	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information			
1a	Name of plan HANESBRANDS INC. PENSION PLAN	1b	Three-digit plan number (PN) ▶	001
		1c	Effective date of plan 01/01/2006	
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) HANESBRANDS INC. 101 N. CHERRY STREET WINSTON-SALEM, NC 27101	2b	Employer Identification Number (EIN) 20-3552316	
		2c	Plan Sponsor's telephone number 336-519-8080	
		2d	Business code (see instructions) 424300	

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	09/03/2026	VIRGINIA PIEKARSKI
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 117
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 0 6a(2) 0 6b 3 6c 110 6d 113 6e 3 6f 116 6g(1) 6g(2) 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

1A 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☒ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information) – Number Attached 0
- (4) ☐ **C** (Service Provider Information)
- (5) ☒ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 12/01/2024 and ending 11/30/2025	
▶ Round off amounts to nearest dollar.	
▶ Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.	
A Name of plan HANESBRANDS INC. PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF HANESBRANDS INC.	D Employer Identification Number (EIN) 20-3552316
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 12 Day 01 Year 2024			
2	Assets:			
a	Market value	2a	5385764	
b	Actuarial value	2b	5174470	
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a	For retired participants and beneficiaries receiving payment	3	113782	113782
b	For terminated vested participants	114	3838496	3838496
c	For active participants	0	0	0
d	Total	117	3952278	3952278
4	If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.44 %	
6	Target normal cost			
a	Present value of current plan year accruals	6a	0	
b	Expected plan-related expenses	6b	74000	
c	Target normal cost	6c	74000	

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	Signature of actuary KYLE W. ANDERSON Type or print name of actuary AON CONSULTING, INC. Firm name MSC# 17704 AON PO BOX 551343 ATLANTA, GA 30355 Address of the firm	08/25/2026 Date 26-05674 Most recent enrollment number 952-886-8000 Telephone number (including area code)
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Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	0
10 Interest on line 9 using prior year's actual return of <u>14.56</u> %	0	0
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.34</u> %		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14 Funding target attainment percentage	14	130.92 %
15 Adjusted funding target attainment percentage	15	130.92 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	130.20 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls**18** Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ▶			18(b)	0	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20 Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No
- b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No
- c** If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:				
a Segment rates:	1st segment: 5.04 %	2nd segment: 5.32 %	3rd segment: 5.59 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22 63
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.....	☒ Yes ☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....	☐ Yes ☒ No
26 Demographic and benefit information	
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...	☐ Yes ☒ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)	31a	74000	
b Excess assets, if applicable, but not greater than line 31a	31b	74000	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	0	0	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	34	0	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	0	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☒ 2019 ☐ 2020 ☐ 2021
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
	For calendar plan year 2024 or fiscal plan year beginning 12/01/2024 and ending 11/30/2025	
	A Name of plan HANESBRANDS INC. PENSION PLAN	B Three-digit plan number (PN) 001
C Plan sponsor's name as shown on line 2a of Form 5500 HANESBRANDS INC.	D Employer Identification Number (EIN) 20-3552316	

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	5399754	5736023
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	5399754	5736023
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	13990	7535
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	13990	7535
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	5385764	5728488

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		386874
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		386874

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	32333	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		32333
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	11817	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		11817
j Total expenses. Add all expense amounts in column (b) and enter total	2j		44150

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		342724
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **FORVIS MAZARS, LLP**

(2) EIN: **44-0160260**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) ☐ This form is filed for a CCT, PSA, DCG or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		☒	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		☒	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		☒	
e Was this plan covered by a fidelity bond?	☒		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)		☒	
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		☒	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		☒	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☒ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 587655.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation		Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.		OMB No. 1210-0110 2024 This Form is Open to Public Inspection.	
For calendar plan year 2024 or fiscal plan year beginning 12/01/2024 and ending 11/30/2025					
A Name of plan HANESBRANDS INC. PENSION PLAN				B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 HANESBRANDS INC.				D Employer Identification Number (EIN) 20-3552316	
Part I Distributions					
All references to distributions relate only to payments of benefits during the plan year.					
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....				1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 36-1561860					
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.					
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year				3	0
Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)					
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☐ No ☒ N/A If the plan is a defined benefit plan, go to line 8.					
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.					
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)				6a	
b Enter the amount contributed by the employer to the plan for this plan year				6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....				6c	
If you completed line 6c, skip lines 8 and 9.					
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A					
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☒ N/A					
Part III Amendments					
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☒ No					
Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.					
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ☐ Yes ☐ No					
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No					
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No					
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No					
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.				Schedule R (Form 5500) 2024 v. 240311	

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year.....

16a

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....

16b

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:

Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%

High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:

☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☒ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation.....

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ____/____/____ (MM/DD/YYYY) and the Opinion Letter serial number_____.

**FINANCIAL STATEMENTS AND REPORT OF
INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS
HANESBRANDS INC. PENSION PLAN
November 30, 2025 and 2024**

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Independent Auditor's Report

Plan Administrator of Hanesbrands Inc. Pension Plan
Winston-Salem, North Carolina

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of Hanesbrands Inc. Pension Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of November 30, 2025 and 2024, and the related statements of changes in net assets available for benefits for the years then ended, the statement of accumulated plan benefits as of December 1, 2024, the related statement of changes in accumulated plan benefits for the year then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of November 30, 2025 and 2024 and for the years then ended, stating that the certified investment information, as described in Note G to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America ("GAAP").
- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion on the Financial Statements

We conducted our audits in accordance with auditing standards generally accepted in the United States of America ("GAAS"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern within one year after the date that these financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all Plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with GAAP.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audits, significant audit findings, and certain internal control-related matters that we identified during the audits.

Forvis Mazars, LLP

Greensboro, North Carolina

September 3, 2026

Federal Employer Identification Number: 44-0160260

Hanesbrands Inc. Pension Plan
Statements of Net Assets Available for Benefits

	November 30, 2025	November 30, 2024
Assets		
Plan interest in Hanesbrands Inc. Master Investment Trust for Defined Benefit Plans . . .	\$ 5,736,023	\$ 5,399,754
Total assets	5,736,023	5,399,754
Liabilities		
Accrued expenses	7,535	13,990
Net assets available for benefits	<u>\$ 5,728,488</u>	<u>\$ 5,385,764</u>

The accompanying notes are an integral part of these financial statements.

Hanesbrands Inc. Pension Plan
Statements of Changes in Net Assets Available for Benefits

	Years Ended	
	November 30, 2025	November 30, 2024
Net investment income:		
Plan interest in Hanesbrands Inc. Master Investment Trust for Defined Benefit Plans net investment income	\$ 422,379	\$ 645,461
Net investment income	422,379	645,461
Benefits paid to participants	(32,333)	(80,124)
Plan expenses	(47,322)	(88,945)
Net increase	342,724	476,392
Net assets available for benefits:		
Beginning of year	5,385,764	4,909,372
End of year	<u>\$ 5,728,488</u>	<u>\$ 5,385,764</u>

The accompanying notes are an integral part of these financial statements.

Hanesbrands Inc. Pension Plan
Statement of Accumulated Plan Benefits

	December 1, 2024
Actuarial present value of accumulated plan benefits	
Vested benefits:	
Participants currently receiving payments	\$ 105,469
Other participants	3,419,267
	<u>3,524,736</u>
Nonvested benefits	—
Total actuarial present value of accumulated plan benefits	<u><u>\$ 3,524,736</u></u>

The accompanying notes are an integral part of this financial statement.

Hanesbrands Inc. Pension Plan
Statement of Changes in Accumulated Plan Benefits

	December 1, 2024
Actuarial present value of accumulated plan benefits at December 1, 2023	\$ 3,543,959
Increase (decrease) during the year attributable to:	
Benefits paid	(80,124)
Interest accumulation due to decrease in discount period	208,516
Change in actuarial assumptions	(150,259)
Other plan experience	2,644
Net decrease	(19,223)
Actuarial present value of accumulated plan benefits at December 1, 2024	\$ 3,524,736

The accompanying notes are an integral part of this financial statement.

**Hanesbrands Inc. Pension Plan
Notes to Financial Statements
November 30, 2025 and 2024**

NOTE A - DESCRIPTION OF PLAN

The following brief description of the Hanesbrands Inc. Pension Plan (the “Plan”) is provided for general information purposes only. Participants should refer to the Plan document for a more complete description of the Plan’s provisions.

General

The Plan is a defined benefit pension plan. Benefits under the Plan were frozen on December 31, 2005, so no further benefits are accruing and no participants can be added to the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (“ERISA”).

Prior to December 1, 2022, the Plan covered employees and former employees of Hanesbrands Inc. (“Hanesbrands”) and its participating divisions (the “Company”). Effective immediately with the Plan year beginning December 1, 2022, the Company spun-off the majority of participants in the Plan into a new, separate plan, the Hanesbrands Inc. Legacy Pension Plan. After this spin-off, the Plan continues to cover only certain employees and former employees with a Part B benefit under the former National Textiles, L.L.C. Pension Plan (i.e., participants with a cash balance plan benefit). The investments of both plans are held in the Hanesbrands Inc. Master Investment Trust for Defined Benefit Plans (the “HBI Investment Trust”).

On December 29, 2022, the SECURE 2.0 Act of 2022 (“SECURE 2.0”) became law. SECURE 2.0 makes various changes applicable to tax qualified retirement plans. Plan management is evaluating the impact of SECURE 2.0 and awaiting additional regulatory guidance from the Internal Revenue Service (“IRS”) and the Department of Labor. The Plan will be amended to reflect any changes made in response to SECURE 2.0 prior to the deadline set by law or applicable regulations.

Contributions

The funding policy for the Plan is to make the necessary contributions to meet minimum funding requirements, as determined by the Plan’s independent actuary. There were no required Company contributions for the plan years ended November 30, 2025 and 2024. No voluntary employee contributions are permitted. The Plan was in compliance with applicable ERISA minimum funding requirements for the years ended November 30, 2025 and 2024.

Retirement Benefits

Participants in the Plan are provided frozen benefits based on the terms of the Plan, as set forth in the Plan document.

Normal Retirement Benefits - Normal retirement is at age 65. The amount of monthly retirement benefits payable to a participant who retires at the normal retirement date will be equal to the participant’s frozen accrued benefit under the Plan.

Early Retirement Benefits - An eligible participant who is at least age 55 and has completed 10 years of service may receive a pension equal to the frozen accrued benefit payable at the normal retirement date. However, if benefits commence before age 65, this amount is reduced based on the terms of the Plan to take into account the participant’s younger age and earlier commencement of the participant’s pension.

Deferred Retirement Benefits - An eligible participant who retires after the normal retirement date may receive a pension calculated in the same manner as for normal retirement, with an actuarial increase for benefits not paid upon normal retirement age. If a participant continues to work, benefit payments will commence following retirement date.

Termination Benefits - A vested participant who terminates employment prior to normal retirement age may receive a deferred monthly benefit payment at normal retirement age equal to the accrued benefit as of the date employment terminates (or as of the date benefits were frozen under the Plan, if earlier).

Preretirement Death Benefits - Following the death of a vested participant, the participant's spouse will receive a monthly benefit equal to the survivor portion of the age-65 frozen accrued benefit payable in the 50% joint and survivor form, with reduction for early commencement. For certain groups covered under the Plan, an enhanced death benefit is provided to the spouse or beneficiary of a participant who dies while actively employed with a vested benefit. If the participant is not fully vested, no benefits are payable.

Benefits under the Plan are subject to certain minimum and maximum amounts.

Vesting

Participants are fully vested upon completion of five years of service (three years of service for certain former National Textiles, L.L.C. Pension Plan participants) or, if earlier, at age 65, if they are still working for the Company.

NOTE B - SUMMARY OF ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements have been prepared using the accrual method of accounting in accordance with generally accepted accounting principles in the United States of America ("U.S. GAAP").

Use of Estimates

The preparation of financial statements requires the Plan's management to make estimates and assumptions that affect the reported amounts of assets and liabilities, and changes therein and disclosure of contingent assets and liabilities, and the actuarial present value of accumulated Plan benefits at the date of the financial statements. Actual results could differ from these estimates.

Valuation of Investments

The Plan maintains an investment in the HBI Investment Trust. The Plan's interest in the HBI Investment Trust is based on the Plan's relative aggregate contributions, benefit payments and other relevant factors. See Note E for a discussion of the fair value of investments.

Purchases and sales of securities are recorded on a trade-date basis. Interest is recorded in the period earned. Dividends are recorded on the ex-dividend date. Net appreciation in fair value of investments includes gains and losses on investments bought and sold as well as held during the year.

Risks and Uncertainties

The HBI Investment Trust and Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the Statements of Net Assets Available for Benefits.

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

Plan Expenses

Plan expenses including fees related to actuary, audit, investment and certain administration costs are paid by the HBI Investment Trust. In addition, certain investment related expenses are included in the net investment income.

Hanesbrands Inc. Pension Plan
Notes to Financial Statements - Continued
November 30, 2025 and 2024

Payment of Benefits

Benefit payments to participants are recorded when paid.

Recent Accounting Pronouncements

There were no recent accounting pronouncements that were applicable to the Plan.

NOTE C - PLAN INTEREST IN HBI INVESTMENT TRUST

At November 30, 2025 and 2024, all of the Plan's investments are held in the HBI Investment Trust. The assets of the HBI Investment Trust are held by The Northern Trust Company (the "Trustee").

The Plan's interest in the HBI Investment Trust was approximately 0.755% and 0.716% as of November 30, 2025 and 2024, respectively. A summary of the net assets of the HBI Investment Trust as of November 30, 2025 and 2024 is as follows:

	Master Trust Balances		Plan's Interest in Master Trust Balances	
	November 30, 2025	November 30, 2024	November 30, 2025	November 30, 2024
Investments, at fair value:				
Collective trusts	\$ 605,110,736	\$ 704,681,983	\$ 4,567,487	\$ 5,046,006
Hedge fund of funds	649,873	894,755	4,905	6,407
Real estate - group trust	21,501,719	22,656,823	162,299	162,238
Real estate - limited partnership	21,363,756	25,697,558	161,258	184,012
U.S. Government Securities	110,552,889	—	834,473	—
Total investments	759,178,973	753,931,119	5,730,422	5,398,663
Non-interest bearing cash	105,631	143,266	797	1,026
Other receivables	636,397	8,970	4,804	65
Net assets of HBI Investment Trust at fair value	<u>\$ 759,921,001</u>	<u>\$ 754,083,355</u>	<u>\$ 5,736,023</u>	<u>\$ 5,399,754</u>

The aggregate net investment income of the HBI Investment Trust for the years ended November 30, 2025 and 2024 is as follows:

	Years Ended	
	November 30, 2025	November 30, 2024
Interest and dividend income	\$ 1,519,646	\$ 1,025,173
Net appreciation in fair value of investments	51,623,573	96,281,732
Net investment income	<u>\$ 53,143,219</u>	<u>\$ 97,306,905</u>

NOTE D - ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated plan benefits represent the estimated future periodic payments, including lump-sum distributions, under the Plan's provisions that are attributable to services rendered by employees through the valuation date. Accumulated Plan benefits include benefits expected to be paid to the following: (1) retired or terminated employees or their beneficiaries, (2) beneficiaries of employees who have died and (3) present employees or their beneficiaries. Benefits payable under all circumstances are included to the extent that they are deemed attributable to employee service rendered through the valuation date.

Actuarial information as of and for the year ended December 1, 2024, as reported on the Statement of Accumulated Plan Benefits and Statement of Changes in Accumulated Plan Benefits, is the most current information available to Plan management and is thus utilized for reporting.

The actuarial present value of accumulated plan benefits for the year ended December 1, 2024 is determined by the Plan's actuary, Aon. The actuarial present value of accumulated plan benefits is that amount that results from applying actuarial

Hanesbrands Inc. Pension Plan
Notes to Financial Statements - Continued
November 30, 2025 and 2024

assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment between the valuation date and the expected date of payment. Significant actuarial assumptions used in the valuation are as follows:

	December 1, 2024	December 1, 2023
Investment return	6.30%, compounded annually	5.95%, compounded annually
Mortality ⁽¹⁾	Pri-2012 Mortality Study	Pri-2012 Mortality Study
Normal retirement age	65	65

(1) The Pri-2012 Mortality Study utilized for December 1, 2024 and 2023 had a generational projection from 2012 using scale MP-2021 and reflecting Aon's Endemic scale adjustment.

The foregoing assumptions are based on the presumption that the Plan will continue. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

NOTE E - FAIR VALUE MEASUREMENTS

Fair value is an exit price, representing the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The HBI Investment Trust utilized market data or assumptions that market participants would use in pricing the asset or liability. A three-tier fair value hierarchy, which prioritizes the inputs used in measuring fair value, is utilized for disclosing the fair value of the HBI Investment Trust's assets and liabilities. These tiers include: Level 1, defined as observable inputs such as quoted prices in active markets; Level 2, defined as inputs other than quoted prices in active markets that are either directly or indirectly observable; and Level 3, defined as unobservable inputs about which little or no market data exists, therefore requiring an entity to develop its own assumptions.

Assets and liabilities measured at fair value are based on one or more of the following three valuation techniques:

- Market approach — prices and other relevant information generated by market transactions involving identical or comparable assets or liabilities.
- Cost approach — amount that would be required to replace the service capacity of an asset or replacement cost.
- Income approach — techniques to convert future amounts to a single present amount based on market expectations, including present value techniques, option-pricing and other models.

The HBI Investment Trust primarily applies the market approach for its investment assets and attempts to utilize valuation techniques that maximize the use of observable inputs and minimize the use of unobservable inputs.

As of November 30, 2025 and 2024, the HBI Investment Trust held certain financial assets that are required to be measured at fair value on a recurring basis. These consisted of U.S. government securities, collective trusts, hedge fund of funds and real estate. The fair value of the U.S. government securities is determined based on inputs including, but not limited to, market quotations, yields, maturities and the bond's terms and conditions and are categorized as Level 2. There were no changes during the years ended November 30, 2025 and 2024 to the valuation techniques used to measure asset and liability fair values on a recurring basis. As of November 30, 2025 and 2024, the HBI Investment Trust held no financial assets that are required to be measured at fair value on a nonrecurring basis.

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or valuation techniques may require the transfer of financial instruments from one fair value level to another.

Hanesbrands Inc. Pension Plan
Notes to Financial Statements - Continued
November 30, 2025 and 2024

The following tables set forth by level within the fair value hierarchy the HBI Investment Trust's assets accounted for at fair value on a recurring basis as of November 30, 2025 and 2024. Assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. The assessment of the significance of a particular input to the fair value measurement requires judgment and may affect the valuation of fair value assets and liabilities and their placement within the fair value hierarchy levels.

Investment Assets at Fair Value as of November 30, 2025				
	Level 1	Level 2	Level 3	Total
Investments at fair value:				
U.S. Government Securities	\$ —	\$ 110,552,889	\$ —	\$ 110,552,889
Total investments in the fair value hierarchy	—	110,552,889	—	110,552,889
Investments measured at net asset value ⁽¹⁾ :				
Collective trusts				605,110,736
Hedge fund of funds				649,873
Real estate - group trust				21,501,719
Real estate - limited partnership				21,363,756
Total investments at net asset value				648,626,084
Total investments at fair value	\$ —	\$ 110,552,889	\$ —	\$ 759,178,973

Investment Assets at Fair Value as of November 30, 2024				
	Level 1	Level 2	Level 3	Total
Investments measured at net asset value ⁽¹⁾ :				
Collective trusts				\$ 704,681,983
Hedge fund of funds				894,755
Real estate - group trust				22,656,823
Real estate - limited partnership				25,697,558
Total investments at net asset value				753,931,119
Total investments at fair value	\$ —	\$ —	\$ —	\$ 753,931,119

(1) Certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in the tables above are intended to permit reconciliation of the fair value hierarchy to the amounts presented within Note C and ultimately to the amounts presented in the Statements of Net Assets Available for Benefits.

The HBI Investment Trust has elected to use a practical expedient to estimate the fair value of the investments in collective trusts, hedge fund of funds and real estate. The net asset value ("NAV"), including member units or an ownership interest in partners' capital to which a proportionate share of net assets is attributed, is used for each investment as of the reporting date.

Investor transactions in the collective trusts (purchases and sales) may occur daily. If the HBI Investment Trust were to initiate a full redemption of the collective trusts, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure the securities liquidations will be carried out in an orderly business manner.

Hedge fund of funds are primarily invested in hedge fund of fund accounts which are broadly diversified across investment managers, investment strategies, asset classes and geographies. Real estate, comprised of a group trust and limited partnership investments, is primarily invested in domestic public real estate investment trusts and private real estate which are broadly diversified across investment managers and property types. Terms for the redemption of the investments in the hedge fund of funds and real estate vary between monthly, quarterly and annually and the notification periods range from 45 days to 90 days. At November 30, 2025 and 2024, excluding required notification periods, there were no other redemption restrictions imposed by the investment managers for the hedge fund of funds. At November 30, 2025 and 2024, there were unfunded commitments of \$9,652,200 and \$8,297,200, respectively.

Hanesbrands Inc. Pension Plan
Notes to Financial Statements - Continued
November 30, 2025 and 2024

NOTE F - PLAN TERMINATION

Although Hanesbrands has not expressed any intention of terminating the Plan, Hanesbrands has the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of termination of the Plan, distribution of the Plan assets shall be made to the participants according to the provisions for such distribution in the Plan document.

If the Plan terminates, a portion of the benefits under the Plan is insured by the Pension Benefit Guaranty Corporation ("PBGC"), a U.S. Government agency. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor benefits. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits and may also depend on the level of benefits guaranteed by the PBGC.

NOTE G - CERTIFIED INFORMATION

The Plan administrator elected the method of annual reporting compliance permitted by ERISA Section 103(a)(3)(C) as of and for the years ended November 30, 2025 and 2024. Accordingly, the Plan administrator received a certification from the Trustee that all investment information for the Plan and the HBI Investment Trust disclosed in the accompanying financial statements, including investments held at November 30, 2025 and 2024 and net appreciation in the fair value of investments and interest and dividends for the years ended November 30, 2025 and 2024, was obtained from information provided by the Trustee and certified as complete and accurate. The Plan's independent accountants did not perform auditing procedures with respect to the certified information, except for comparing such information to the related information disclosed in these financial statements.

NOTE H - TAX STATUS

By letter dated January 17, 2018, the IRS determined that the Plan and HBI Investment Trust met the qualification requirements set forth in Sections 401(a) and 501(a) of the Internal Revenue Code ("IRC"). The Plan has been subsequently amended since the submission for determination, but the Plan's management believes the Plan remains in compliance with the applicable requirements of the IRC.

U.S. GAAP requires the Plan's management to evaluate tax positions taken by the Plan and to recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan's management has analyzed the tax positions taken by the Plan, and has concluded that as of November 30, 2025 and 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no tax audits for any period in progress.

The Plan is intended to be tax-qualified under Section 1165(a) of the 1994 Puerto Rico IRC, as amended (the "1994 Code") and under Section 1081.01(a) of the 2011 Puerto Rico IRC, as amended (the "2011 Code") (the 1994 Code and 2011 Code are hereinafter collectively referred to as the "PR IRC") and was submitted to the Secretary of the Puerto Rico Department of Treasury for a determination to such end. The application is still pending a determination from the Secretary in a submission filed on December 9, 2016. The Plan's management believes the Plan remains compliant in form with the applicable requirements of the PR IRC.

NOTE I - PARTY-IN-INTEREST TRANSACTIONS

Assets of the HBI Investment Trust are invested in investments managed by the Trustee of the HBI Investment Trust; therefore, these transactions qualify as party-in-interest transactions. Fees paid by the HBI Investment Trust to the Trustee totaled \$1,503,312 and \$1,603,778 for the years ended November 30, 2025 and 2024, respectively.

NOTE J - SUBSEQUENT EVENTS

Effective December 1, 2025, Hanesbrands was acquired by Gildan Activewear, Inc. On that date, the plan name was amended to Hanesbrands LLC Pension Plan, the plan sponsor was amended to Hanesbrands LLC, and the master investment trust name was amended to the Hanesbrands LLC Master Investment Trust for Defined Benefit Plans.

The Plan has evaluated subsequent events through September 3, 2026, the date the financial statements were available to be issued.

Schedule SB Attachment (Form 5500) —2024 Plan Year
Hanesbrands, Inc. Pension Plan
EIN: 20-3552316 PN: 001

Schedule SB, Part V — Statement of Actuarial
Assumptions/Methods

For ERISA Requirements

Interest Rates for Minimum Funding Purposes	Based on segment rates with a four-month lookback (as of August 2024), each adjusted as needed to fall within the 25-year average interest rate stabilization corridor
1st Segment Rate	5.04%
2nd Segment Rate	5.32%
3rd Segment Rate	5.59%
Interest Rates for Maximum Tax Purposes	Based on segment rates with a four-month lookback (as of August 2024), without regard to interest rate stabilization
1st Segment Rate	5.04%
2nd Segment Rate	5.32%
3rd Segment Rate	5.33%
Optional Payment Form Election Percentage	
Textiles Part B, Active and Terminated Vested Participants	Males: 60% elect the Lump Sum 22% elect the Joint and 50% Survivor Annuity 18% elect the Single Life Annuity Females: 60% elect the Lump Sum 12% elect the Joint and 50% Survivor Annuity 28% elect the Single Life Annuity
All Other Active and Terminated Vested Participants not Included Above	Males: 55% elect the Joint and 50% Survivor Annuity 45% elect the Single Life Annuity Females: 30% elect the Joint and 50% Survivor Annuity 70% Single Life Annuity
Optional Payment Form Conversion Interest Rate	4.50% for lump sums and certain only annuities. Basis in plan document for other forms of payment. 4.00% long-term assumption for 30-Year Treasury rates used to reflect late retirement adjustments.

Schedule SB Attachment (Form 5500) —2024 Plan Year
Hanesbrands, Inc. Pension Plan
EIN: 20-3552316 PN: 001

Optional Payment Form Conversion Mortality

The mortality prescribed in IRC Revenue Ruling 2001-62 for lump sums and certain only annuities. Basis in plan document for other forms of payment.

Retirement Age

Active Participants

Not Applicable

Terminated Vested Participants

See Table 1

Mortality Rates

Healthy and Disabled

2024 generational mortality tables for annuitants and non-annuitants per §1.430(h)(3)-1(b)

Withdrawal Rates

Not Applicable

Disability Rates

Not Applicable

Decrement Timing

Middle of year decrements (except that retirement is assumed to occur at the beginning of the year for ages where the assumed retirement rate is 100%)

Surviving Spouse Benefit

It is assumed that 80% of males and 50% of females have an eligible spouse, and that males are two years older than their spouses.

Benefit Limits

Projected benefits are limited by the current IRC section 415 maximum benefit of \$275,000.

Valuation of Plan Assets

Smoothed fair market value of assets over the current and prior two years, adjusted for contributions, benefit payments, administrative expenses, and expected earnings. The average value of assets calculated in this manner is further limited to not less than 90% nor more than 110% of fair market value.

A characteristic of this method is that the expected distribution of the value of plan assets is skewed toward understatement relative to the corresponding market values for expected long-term rates of return in excess of the third segment rate under IRC section 430(h)(2)(C)(iii).

As a result of the plan spinoff, asset smoothing was restarted as of 12/1/2022.

Cash Balance Interest Crediting Rate

5.50%

Cash Balance Annuity Conversion Rate

5.50%

Schedule SB Attachment (Form 5500) —2024 Plan Year
Hanesbrands, Inc. Pension Plan
EIN: 20-3552316 PN: 001

Expected Return on Assets

12/1/2022-11/30/2023	7.00%, limited to 5.92%
12/1/2023-11/30/2024	6.95%, limited to 5.74%
12/1/2024-11/30/2025	7.20%, limited to 5.59%

Trust Expenses Included in Target Normal Cost

Based on the average of the prior two years actual plan administrative expenses (excluding PBGC premiums), plus the estimated PBGC premiums for the current year, rounded to the nearest \$1,000. \$74,000 for 12/1/2024.

**Beneficiaries of Current Retirees With
Joint & Survivor Payment Forms**

Valuation reflects likelihood of beneficiary surviving to valuation date based on the current ASC 960 plan accounting mortality assumption. Assumption only applies when beneficiary status is currently unknown.

Actuarial Method

Standard unit credit cost method

Valuation Date

December 1, 2024

Schedule SB Attachment (Form 5500) —2024 Plan Year
Hanesbrands, Inc. Pension Plan
EIN: 20-3552316 PN: 001

Table 1

Retirement Rates – Terminated Vested Participants

Age	Rate
55	18.00%
56	4.00%
57	4.00%
58	4.00%
59	4.00%
60	4.00%
61	4.00%
62	7.00%
63	5.00%
64	25.00%
65+	100.00%

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 12/01/2024 and ending 11/30/2025

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan HANESBRANDS INC. PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF HANESBRANDS INC.	D Employer Identification Number (EIN) 20-3552316
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B ☐ Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500	

Part I Basic Information

1 Enter the valuation date: Month 12 Day 01 Year 2024			
2 Assets:			
a Market value	2a	5,385,764	
b Actuarial value	2b	5,174,470	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	3	113,782	113,782
b For terminated vested participants	114	3,838,496	3,838,496
c For active participants	0	0	0
d Total	117	3,952,278	3,952,278
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)	☐		
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5	5.44%	
6 Target normal cost			
a Present value of current plan year accruals	6a	0	
b Expected plan-related expenses	6b	74,000	
c Target normal cost	6c	74,000	

Statement by Enrolled Actuary-

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	Kyle W. Anderson <i>KWA</i>	08/25/2026
	Signature of actuary	Date
Kyle W. Anderson	Type or print name of actuary	2605674
Aon Consulting, Inc.	Firm name	Most recent enrollment number
MSC# 17704 Aon PO Box 551343		952-886-8000
Atlanta GA 30355	Address of the firm	Telephone number (including area code)

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.

Schedule SB (Form 5500) 2024
v. 240311

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	0
10 Interest on line 9 using prior year's actual return of <u>14.56%</u>	0	0
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.34%</u>		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12)	0	0

Part III Funding Percentages

14 Funding target attainment percentage	14	130.92 %
15 Adjusted funding target attainment percentage	15	130.92 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	130.20 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ▶			18(b)	0	18(c)
				0	0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year?	☐ Yes ☒ No
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☐ Yes ☐ No
c If line 20a is "Yes," see instructions and complete the following table as applicable:	

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:				
a Segment rates:	1st segment: 5.04 %	2nd segment: 5.32 %	3rd segment: 5.59 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22 63
23 Mortality table(s) (see instructions)	☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☒ Yes ☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
26 Demographic and benefit information	
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...	☐ Yes ☒ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)	31a	74,000	
b Excess assets, if applicable, but not greater than line 31a	31b	74,000	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	0	0	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....	34	0	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	0	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☒ 2019 ☐ 2020 ☐ 2021
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Schedule SB Attachment (Form 5500) —2024 Plan Year
Hanesbrands, Inc. Pension Plan
EIN: 20-3552316 PN: 001

Schedule SB, line 22 — Description of Weighted Average Retirement Age

The average retirement age shown in line 22 has been calculated by assuming the following retirement rates and no decrements other than retirement for this calculation. All retirements are assumed to occur at mid-year, except for the 100% retirement age.

(a) Age	(b) Rate	(c) Weight	(d) Product (a) × (b) × (c)
55.5	6.00%	1.0000	3.33
56.5	6.00%	0.9400	3.19
57.5	6.00%	0.8836	3.05
58.5	6.00%	0.8306	2.92
59.5	6.00%	0.7807	2.79
60.5	6.00%	0.7339	2.66
61.5	13.00%	0.6899	5.52
62.5	20.00%	0.6002	7.50
63.5	13.00%	0.4801	3.96
64.5	20.00%	0.4177	5.39
65.5	32.00%	0.3342	7.00
66.5	20.00%	0.2272	3.02
67.5	20.00%	0.1818	2.45
68.5	20.00%	0.1454	1.99
69.5	20.00%	0.1163	1.62
70.5	25.00%	0.0931	1.64
71.5	25.00%	0.0698	1.25
72.5	25.00%	0.0524	0.95
73.5	25.00%	0.0393	0.72
74.5	25.00%	0.0295	0.55
75	100.00%	0.0221	1.66
Weighted Average			63.16

Schedule SB Attachment (Form 5500) —2024 Plan Year
Hanesbrands, Inc. Pension Plan
EIN: 20-3552316 PN: 001

Schedule SB, Part V — Statement of Actuarial
Assumptions/Methods

For ERISA Requirements

Interest Rates for Minimum Funding Purposes

Based on segment rates with a four-month lookback (as of August 2024), each adjusted as needed to fall within the 25-year average interest rate stabilization corridor

1st Segment Rate	5.04%
2nd Segment Rate	5.32%
3rd Segment Rate	5.59%

Interest Rates for Maximum Tax Purposes

Based on segment rates with a four-month lookback (as of August 2024), without regard to interest rate stabilization

1st Segment Rate	5.04%
2nd Segment Rate	5.32%
3rd Segment Rate	5.33%

Optional Payment Form Election Percentage

Textiles Part B, Active and Terminated Vested Participants

Males:
60% elect the Lump Sum
22% elect the Joint and 50% Survivor Annuity
18% elect the Single Life Annuity

Females:
60% elect the Lump Sum
12% elect the Joint and 50% Survivor Annuity
28% elect the Single Life Annuity

All Other Active and Terminated Vested Participants not Included Above

Males:
55% elect the Joint and 50% Survivor Annuity
45% elect the Single Life Annuity

Females:
30% elect the Joint and 50% Survivor Annuity
70% Single Life Annuity

Optional Payment Form Conversion Interest Rate

4.50% for lump sums and certain only annuities. Basis in plan document for other forms of payment. 4.00% long-term assumption for 30-Year Treasury rates used to reflect late retirement adjustments.

Schedule SB Attachment (Form 5500) —2024 Plan Year
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Optional Payment Form Conversion Mortality

The mortality prescribed in IRC Revenue Ruling 2001-62 for lump sums and certain only annuities. Basis in plan document for other forms of payment.

Retirement Age

Active Participants

Not Applicable

Terminated Vested Participants

See Table 1

Mortality Rates

Healthy and Disabled

2024 generational mortality tables for annuitants and non-annuitants per §1.430(h)(3)-1(b)

Withdrawal Rates

Not Applicable

Disability Rates

Not Applicable

Decrement Timing

Middle of year decrements (except that retirement is assumed to occur at the beginning of the year for ages where the assumed retirement rate is 100%)

Surviving Spouse Benefit

It is assumed that 80% of males and 50% of females have an eligible spouse, and that males are two years older than their spouses.

Benefit Limits

Projected benefits are limited by the current IRC section 415 maximum benefit of \$275,000.

Valuation of Plan Assets

Smoothed fair market value of assets over the current and prior two years, adjusted for contributions, benefit payments, administrative expenses, and expected earnings. The average value of assets calculated in this manner is further limited to not less than 90% nor more than 110% of fair market value.

A characteristic of this method is that the expected distribution of the value of plan assets is skewed toward understatement relative to the corresponding market values for expected long-term rates of return in excess of the third segment rate under IRC section 430(h)(2)(C)(iii).

As a result of the plan spinoff, asset smoothing was restarted as of 12/1/2022.

Cash Balance Interest Crediting Rate

5.50%

Cash Balance Annuity Conversion Rate

5.50%

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Expected Return on Assets

12/1/2022-11/30/2023	7.00%, limited to 5.92%
12/1/2023-11/30/2024	6.95%, limited to 5.74%
12/1/2024-11/30/2025	7.20%, limited to 5.59%

Trust Expenses Included in Target Normal Cost

Based on the average of the prior two years actual plan administrative expenses (excluding PBGC premiums), plus the estimated PBGC premiums for the current year, rounded to the nearest \$1,000. \$74,000 for 12/1/2024.

**Beneficiaries of Current Retirees With
Joint & Survivor Payment Forms**

Valuation reflects likelihood of beneficiary surviving to valuation date based on the current ASC 960 plan accounting mortality assumption. Assumption only applies when beneficiary status is currently unknown.

Actuarial Method

Standard unit credit cost method

Valuation Date

December 1, 2024

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Table 1

Retirement Rates – Terminated Vested Participants

Age	Rate
55	18.00%
56	4.00%
57	4.00%
58	4.00%
59	4.00%
60	4.00%
61	4.00%
62	7.00%
63	5.00%
64	25.00%
65+	100.00%

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Schedule SB, Part V — Summary of Plan Provisions

The plan was originally established as of January 1, 1998. On March 31, 1998, assets and liabilities for certain participants in the Sara Lee Corporation Consolidated Pension and Retirement Plan were spun off to the National Textiles, L.L.C. Pension Plan. Benefits consisted of two parts: Part A was a career average pay formula and Part B was a cash balance plan formula. Participants who transferred into the plan also had frozen December 31, 1997 benefits. The frozen benefit is included as part of the Part A benefit. As of August 31, 2009, the plan was merged into the Hanesbrands Inc. Pension and Retirement Plan, which was renamed as the Hanesbrands Inc. Pension Plan.

Effective December 1, 2022, nearly all participant in the Hanesbrands Inc. Pension Plan were spun off to the Hanesbrands inc. Legacy Pension Plan. 118 deferred vested participants with a National Textiles cash balance account as identified by Hanesbrands remaining in the Hanesbrands Inc. Pension Plan. The benefits for these participants as a part of the former National Textiles, L.L.C Pension Plan are summarized below.

Plan Effective Date	October 30, 1998.
Plan Freeze Date	Part A Benefit freeze effective December 31, 2003. Part B Benefit freeze effective December 31, 2002.
Plan Year	December 1 to November 30 (effective December 1, 2018, previously calendar plan year).
Plan Eligibility	Plan participation was frozen December 1, 2003.
Normal Retirement	
Eligibility	Age 65.
Benefit	Frozen benefit equal to the sum of Part A and Part B. Part A benefit frozen as of December 31, 2003. Part B Cash balance stopped receiving benefit credits effective January 1, 2003. Cash balance interest credits are applied the last day of each calendar year and are generally equal to the greater of: (1) The greater of the annual rate of interest on 30-year Treasury securities published for the month of October or November in the immediately preceding calendar year; and (2) 5.5%. To comply with final hybrid plan regulations, beginning January 1, 2017, cash balance interest credits are further constrained to be no greater than the third segment rate described in Code section 430(h)(2)(c)(iii) for the month of September in the immediately preceding calendar year with stabilization described in Code section 430(h)(2)(c)(iv) and no less than 4%.

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The cash balance account is converted to cash balance monthly annuity benefit using 5.5% interest rate and applicable mortality table defined in 417(e)(3). Cash balance benefit may not be less than what it would have been if determined on December 31, 2002.

Part A Minimum Annual Benefit:

\$480 multiplied by minimum of one and credited service divided by minimum of 20 or projected credited service at normal retirement date (note that credited service continues to accrue for purposes of this minimum).

Early Retirement

Eligibility

Age 55 and 10 years of vesting service.

Benefit

Normal Retirement Benefit reduced 6% per year from 65 to 60 and 4% per year from 60 to 55.

Late Retirement

Eligibility

Over age 65.

Benefit

Normal Retirement Benefit calculated as of late retirement date. With actuarial increases as applicable.

Vested Retirement

Eligibility

Five years of vesting service.

Benefit

Participants with less than 10 years of vesting service:

Normal Retirement Benefit commencing at age 65.

Participants with 10 or more years of vesting service:

Early Retirement Benefit commencing at age 55 or later.

Participants with a Part B benefit may elect to receive an immediate benefit in either the normal form or as a lump sum. If Part B participant is electing a benefit that will commence prior to age 55, the reductions are 8% per year from 65 to 60, 4% per year from 60 to 55, 3% per year from 55 to 50, 2% per year from 50 to 45, 1% per year from 45 to 40, 0.50% per year from 40 to 30 and 0.25% per year prior to 30, however the reduction cannot exceed the reduction that would apply if the plan's definition of actuarial equivalence was used.

Schedule SB Attachment (Form 5500) —2024 Plan Year
Hanesbrands, Inc. Pension Plan
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Preretirement Death

Eligibility

Part A Benefit Five years of vesting service.

Part B Benefit Five years of vesting service.

Benefit

Part A Benefit If retirement eligible at date of death, 50% of the benefit the participant would have received if they had retired on the date of death and elected the 50% J&S option. Spouse may elect to defer this benefit, but no later than participant's age 65.

If not retirement eligible at date of death, 50% of the benefit the participant would have received if the participant had terminated on date of death survived to normal retirement date and had elected the 50% J&S option. If participant had more than 10 years of vesting service, spouse may elect earlier commencement but no earlier than participant's age 55 date. Benefits are reduced for early commencement as described above in the vested retirement section.

Non-spouse beneficiary immediately receives an actuarial equivalent lump sum.

Part B Benefit Unmarried participants receive cash balance account as an immediate lump sum payable to the estate.

Married participants receive the survivor benefit described above for Part A, but applied to the cash balance benefit. The surviving spouse may commence prior to the participant's age 55. If the spouse commences prior to age 55, the earlier retirement reductions described in the vested retirement benefit apply.

Disability Retirement

No special disability retirement benefits or provisions are defined.

Normal Form of Payment

Married participants: 50% joint and survivor annuity.
Unmarried participants: Single life annuity.

Schedule SB Attachment (Form 5500) —2024 Plan Year
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Optional Forms of Payment

- Life annuity (if married)
- 10-year certain and life
- 50%, 66 $\frac{2}{3}$ %, 75% or 100% joint & survivor annuity
- 5, 6, 7, 8, 9 or 10 year certain only annuity
- Lump sums under \$10,000 for Part A benefit
- Lump sum for entire Part B benefit

For vested retirements, the only optional payment forms are the single life annuity, the 50% joint & survivor annuity, lump sums under \$10,000 for the Part A benefit and lump sum for the entire Part B benefit.

Actuarial Equivalence

Varies and is not always based on a set mortality table and interest rate. See pages K-9 to K-11 (as amended by Amendment 3) of the plan document.

Special Provisions

There are four individuals who were participating in the "SLC Benefit Part" of the prior plan. These participants have additional optional forms available on their SLC benefit, different early retirement provisions, and different actuarial reduction factors. Since there are only four individuals, these special provisions will not be valued as part of the actuarial valuation.

Schedule SB Attachment (Form 5500) —2024 Plan Year
Hanesbrands, Inc. Pension Plan
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Other Information to Fully and Fairly Disclose the Actuarial Position of
the Plan

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Schedule SB Attachment (Form 5500) —2024 Plan Year
Hanesbrands, Inc. Pension Plan
EIN: 20-3552316 PN: 001

Schedule SB, line 24 — Change in Actuarial Assumptions

The funding valuation reflects the following assumption changes:

- The optional payment form conversion rate for lump sums and certain-only annuities was changed from 4.70% to 4.50% to reflect the most recent 30-year Treasury rates.
- A change in the cash balance interest crediting rate from 5.00% based on the December 2023 417(e) 3rd segment rate, to 5.50% based on the December 2024 417(e) 3rd segment rate.
- A change in the long-term assumption for 30-Year Treasury Rates used to reflect late retirement increases from 3.00% to 4.00%.
- A change in the expected rate of return on assets from 6.95% (limited to 5.74%) for the 2023 plan year to 7.50% (limited to 5.59%) for the 2024 plan year. Note that this change had no impact on the results presented in the report.

The rationales for selecting each of the assumptions used in the funding valuation and for the assumption changes summarized above are described in more detail in the Accounting Assumption Methodology document issued in January 2025 and the Assumption Support section of the December 31, 2024 Global Year-End Disclosure Report issued in January 2025. The general impact of the changes listed above is shown in the December 1, 2024 Actuarial Report issued in January 2026.

The assumption changes listed above (excluding those prescribed or indexed) did not reduce the funding shortfall more than the thresholds stated in Internal Revenue Code Section 430(h)(5), so approval of the Commissioner is not required.

Schedule SB Attachment (Form 5500) —2024 Plan Year
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Schedule SB, line 22 — Description of Weighted Average Retirement Age

The average retirement age shown in line 22 has been calculated by assuming the following retirement rates and no decrements other than retirement for this calculation. All retirements are assumed to occur at mid-year, except for the 100% retirement age.

(a) Age	(b) Rate	(c) Weight	(d) Product (a) × (b) × (c)
55.5	6.00%	1.0000	3.33
56.5	6.00%	0.9400	3.19
57.5	6.00%	0.8836	3.05
58.5	6.00%	0.8306	2.92
59.5	6.00%	0.7807	2.79
60.5	6.00%	0.7339	2.66
61.5	13.00%	0.6899	5.52
62.5	20.00%	0.6002	7.50
63.5	13.00%	0.4801	3.96
64.5	20.00%	0.4177	5.39
65.5	32.00%	0.3342	7.00
66.5	20.00%	0.2272	3.02
67.5	20.00%	0.1818	2.45
68.5	20.00%	0.1454	1.99
69.5	20.00%	0.1163	1.62
70.5	25.00%	0.0931	1.64
71.5	25.00%	0.0698	1.25
72.5	25.00%	0.0524	0.95
73.5	25.00%	0.0393	0.72
74.5	25.00%	0.0295	0.55
75	100.00%	0.0221	1.66
Weighted Average			63.16

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Schedule SB, Part V — Summary of Plan Provisions

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Plan Eligibility	Plan participation was frozen December 1, 2003.
Normal Retirement	
Eligibility	Age 65.
Benefit	Frozen benefit equal to the sum of Part A and Part B. Part A benefit frozen as of December 31, 2003. Part B Cash balance stopped receiving benefit credits effective January 1, 2003. Cash balance interest credits are applied the last day of each calendar year and are generally equal to the greater of: (1) The greater of the annual rate of interest on 30-year Treasury securities published for the month of October or November in the immediately preceding calendar year; and (2) 5.5%. To comply with final hybrid plan regulations, beginning January 1, 2017, cash balance interest credits are further constrained to be no greater than the third segment rate described in Code section 430(h)(2)(c)(iii) for the month of September in the immediately preceding calendar year with stabilization described in Code section 430(h)(2)(c)(iv) and no less than 4%.

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Part A Minimum Annual Benefit:

\$480 multiplied by minimum of one and credited service divided by minimum of 20 or projected credited service at normal retirement date (note that credited service continues to accrue for purposes of this minimum).

Early Retirement

Eligibility

Age 55 and 10 years of vesting service.

Benefit

Normal Retirement Benefit reduced 6% per year from 65 to 60 and 4% per year from 60 to 55.

Late Retirement

Eligibility

Over age 65.

Benefit

Normal Retirement Benefit calculated as of late retirement date. With actuarial increases as applicable.

Vested Retirement

Eligibility

Five years of vesting service.

Benefit

Participants with less than 10 years of vesting service:

Normal Retirement Benefit commencing at age 65.

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Eligibility

Part A Benefit Five years of vesting service.

Part B Benefit Five years of vesting service.

Benefit

Part A Benefit If retirement eligible at date of death, 50% of the benefit the participant would have received if they had retired on the date of death and elected the 50% J&S option. Spouse may elect to defer this benefit, but no later than participant's age 65.

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