FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C	20549
vasilington,	D.C.	20049

STATEMENT	OF CHANGES I	N BENEFICIAL	OWNERSHIP

**OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Cochran Hope F				2. Issuer Name <b>and</b> Ticker or Trading Symbol HASBRO, INC. [HAS]									ck all app Direc	tor	ng Pers	son(s) to Is				
(Last)	(F SBRO, IN	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/08/2022									Office below	er (give title		Other (sbelow)	specify	
1011 NE	WPORT A	VENUE			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Inc	5. Individual or Joint/Group Filing (Check Applicable					
(Street) PAWTU	CKET R	I 0	2861											X	Form	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate) (Z	Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			Execution Date,				ies Acquired (A) Of (D) (Instr. 3,			Benefic	ies For cially (D) Following (I) (		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
							Code	v	Amount	mount (A) or (D)		rice	Transa	saction(s) : 3 and 4)			(11301. 4)			
Common Stock (Par Value \$.50 per share) 06/08/2			/2022			Α		1,975	1,975 A		\$ <mark>0</mark>	12,730			D					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution if any	o. Deemed ecution Date, any onth/Day/Year)		4. Transaction Code (Instr. 8)		rative rative rities lired r osed ) r. 3, 4	6. Date Exerci Expiration Dat (Month/Day/Ye		e Amo sar) Seci Und Deri		_	str.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y [0	10. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amou or Numb of Share	per						

**Explanation of Responses:** 

Matthew Gilman, P/O/A for Hope Cochran

06/10/2022

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.