FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-028							

37 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

	. , ,				ors	Sectio	on 30(h)	of the	Ínvest	tment C	om	pany Act o	of 194	10							
Name and Address of Reporting Person* Stone West Mary E					2. Issuer Name and Ticker or Trading Symbol HASBRO INC [HAS]										5. Relationship of Reporting Person(s) to Issue (Check all applicable)					suer	
Stone v	vest iviai	<u>y_L</u>								_						X	Direc	ctor		10% O	wner
(Last) (First) (Middle) C/O HASBRO, INC.						3. Date of Earliest Transaction (Month/Day/Year) 05/18/2017											Officer (give title below)			Other (specify below)	
1011 NE	WPORT A	VENUE			4. If	Ame	ndment	, Date o	of Orig	ginal File	ed ((Month/Da	ay/Yea	ar)	6.	6. Individual or Joint/Group Filing (Check Applicat					pplicable
(Ctt)						4. If Amendment, Date of Original Filed (Month/Day/Year)										Line)					
(Street) PAWTUCKET RI 02861																X	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	itate) (Zip)																		
		Tabl	e I - Non	-Deriva	ative	Sec	curitie	s Ac	quire	ed, Di	sp	osed o	f, or	Bene	eficia	ally (Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ar) I	2A. Deemed Execution Date, if any (Month/Day/Year)		Co	Transaction Dispos Code (Instr. 5)		Disposed	ities Acquired (A d Of (D) (Instr. 3,			4 and Secu Bene		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Co	ode V		Amount		(A) or (D)	Price	Trans		saction(s) r. 3 and 4)			(5 4)
Common Stock (Par Value \$.50 per share) 05/18				05/18	/2017					A		1,461		A	\$0		3,055			D	
		Та	ıble II - D (e									sed of, on the second s				y Ov	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date,	Code (Inst				6. Date Exercisable Expiration Date (Month/Day/Year)				and 7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)		str. 3		vative urity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	G F O (I	.0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable		xpiration ate	Title	or Nun of							

Explanation of Responses:

Tarrant Sibley, P/O/A for Mary 05/22/2017

Beth West

** Signature of Reporting Person

Date

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

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

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

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