FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	OVAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

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

1. Name and Address of Reporting Person* HASSENFELD ALAN G				HASBRO INC [HAS]								S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner							
(Last)	,	rst) FAMILY INIT	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 08/16/2017									Λ		er (give title		(specify	
101 DYER STREET, SUITE 401					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) PROVIDENCE RI 02903													Line) X		n filed by More	Reporting Pers			
(City)	(St	ate)	(Zip)																
		Tab	le I - N	Non-Deriva	ative	Seci	uritie	s Ac	quire	d, D	isposed o	f, or E	Benefic	cially	Owne	ed			
Date		2. Transaction Date (Month/Day/Y		2A. Deemed Execution Date, if any (Month/Day/Year)	´	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Beneficially Owned Followin		rities ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common	Stock (Par	Value \$.50 per s	hare)												2	29,140	D		
Common Stock (Par Value \$.50 per share) 08/3			08/16/20:	17			S ⁽²⁾		185	D	\$99.5	166 ⁽⁴⁾	7,127,789		I(1)	As one of the Trustees of Trusts for the benefit of himself			
Common Stock (Par Value \$.50 per share) 08/16/20:				17				S ⁽³⁾		91	D \$99.51		166 ⁽⁴⁾	1,656,062		I (1)	As one of the Trustees of the Ellen H. Block Trust		
		Т	able II	- Derivati							posed of, convertib				vned				
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction 3A. Deemed Execution Date Execution Date, if any			4. Transa Code (. 5. Numl Transaction of Code (Instr. Derivati				e Exe	rcisable and Date	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Pr Deriv Secu (Inst	vative derivati rity Securiti r. 5) Benefic Owned Followi Reporte Transac	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
	of Bosnons				Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares						

- 1. Mr. Hassenfeld disclaims beneficial ownership of all these shares except to the extent of his proportionate pecuniary interest therein.
- 2. All sales were made by the Alan G. Hassenfeld Trust
- 3. All sales were made by the Ellen H. Block Trust
- 4. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$99.50 to \$99.55 inclusive. The reporting person undertakes to provide to Hasbro, Inc., any security holder of Hasbro, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote (4).

Tarrant Sibley, P/O/A for Alan 08/18/2017 G. Hassenfeld

** 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.