Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APP	ROVAL						
	OMB Number:	3235-0287						
	Estimated average burden							
-	haura nar raananaa	٥٦						

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* Connect: Mishael NV. O.				2. Issuer Name and Ticker or Trading Symbol HASBRO INC [HAS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Garrett Michael W O								. ,					X	Direct	or		10% Ov	vner	
(Last) 1, AV. Di	(FI		(Middle)		Date of /30/20		st Trar	nsaction (Mor	on (Month/Day/Year)					Office below	r (give title)		Other (s below)	specify	
						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	AUX V	8 (CH-1802								X Form filed by One Reporting Person Form filed by More than One Reporting								
(City)	(S	tate) ((Zip)											Perso	n ´				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,			Code (In	nsaction de (Instr. 5) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				or and	5. Amou Securiti Benefic Owned Reporte	ties For cially (D) Following (I)		Ownership rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
					Code V Amount (A) or Pr				Pr Pr	ice	Transac (Instr. 3	tion(s)			(Instr. 4)				
	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	Date, Transaction Code (Instr.		n of		6. Date Exerc Expiration D (Month/Day/		and 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Ex _I	piration te	Title	Amou or Numb of Share	er						
Phantom Stock Units ⁽¹⁾	(2)	12/30/2005		A		942		(3)(4)		(3)(4)	Common Stock	942	2	\$20.18	1,484		D		

Explanation of Responses:

- 1. All of the phantom stock units were acquired pursuant to the Hasbro, Inc. Deferred Compensation Plan for Non-Employee Directors in accordance with Section 16b-3.
- 2. Units correspond 1-for-1 with common stock.
- 3. Units are settled only in cash and are payable after the reporting person ceases to be a director.
- 4. Vesting of 43 units will occur on the earlier of 12/31/05 (provided the reporting person is still a director as of such date) and the death, disability or retirement (after age 72) of the reporting person. Vesting of 43 units will occur on the earlier of 12/31/06 (provided the reporting person is still a director as of such date) and the death, disability or retirement (after age 72) of the reporting person. The remainder of the units are immediately vested.

Tarrant Sibley, p/o/a for Michael W.O. Garrett

01/03/2006

** 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.