FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPE	OMB APPROVAL										
	OMB Number:	3235-0287										
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0.5

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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*					2. Issuer Name <b>and</b> Ticker or Trading Symbol HASBRO INC [ HAS ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
STERN PAULA					1101	7110	110	[ 11110 ]					X Direc	tor	10% C	wner	
(Last) (First) (Middle) C/O AVON PRODUCS INC					3. Date of Earliest Transaction (Month/Day/Year) 09/30/2005							Office below	er (give title v)	Other below)	(specify		
1345 AVENUE OF THE AMERICAS					4. If Amendment, Date of Original Filed (Month/Day/Year)							6.	6. Individual or Joint/Group Filing (Check Applicable				
(Street) NEW YORK NY 10105-019			10105-0196		Jan S. Grigman and (menangay) really								X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	tate) (	(Zip)														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date				Transaction ate lonth/Day/Y	Execution Date,			Code (	Transaction Code (Instr. 3, 2) 5)			str. 3, 4 a	4 and Securities Beneficially Owned Follow Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	V	Amount	t (A) or Pr		Transa (Instr. 3	ction(s) and 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 Dat if any (Month/Day/Ye	Code	Transaction Code (Instr.		n of		6. Date Exercisable an Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amount or Number of Shares					
Phantom Stock Units <sup>(1)</sup>	(2)	09/30/2005		A		356		(3)(4)		(3)(4)	Common Stock	356	\$19.65	9,340	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 14 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 14 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 Paula Stern

10/03/2005

\*\* 0

\*\* 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.