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## 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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

## OMB APPROVAL OMB Number: 3235-0287

Estimated average burden	0.5
hours per response:	0.5

					0	r Sect	tion 30(h)	of the	e Inve	estment	Con	npany Act o	of 1940	)							
1. 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)					
IRUEI	<u>TRUEB MARTIN R</u>															Directo	r		10% Ov	vner	
						2 Data of Earliast Transaction (Month/Day/Vaar)									— y	C Officer below)	(give title		Other (s below)	specify	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/24/2007										Sr. VP and Treasurer					
200 NARRAGANSETT PARK DRIVE																	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	iu iic	usurer		
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6 In	6. Individual or Joint/Group Filing (Check Applicable					
(Street)					1.									Line							
PAWTU	CKET	RI	02862												2	Form fi	led by One	e Repo	orting Perso	n	
·					-   -	Form filed by More than One Reporting Person											rting				
(City)		State)	(Zip)													Feison					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transa Date					Execution			э,  т	3. 4. Securities Acquire Disposed Of (D) (Inst			luired (Instr.	(A) or 3, 4 and	5. Amour Securitie	s Form		Direct	7. Nature of Indirect			
(Month/D				/Day/Y	Day/Year)   if any   (Month/D				Code (Instr. 5) 8)			Beneficia Owned F	ollowing (I) (In		str. 4)	Beneficial Ownership					
							L	Code		A	nount (A) or (D)		Dirios	Reported Transaction(s)				(Instr. 4)			
										Code	v	Amount	(D	oj 	Price	(Instr. 3 a	(Instr. 3 and 4)				
			Table II -	Deriva	ative	Sec	urities	Acq	quire	ed, Dis	spo	osed of,	or Be	enef	icially	Owned					
				(e.g., p	outs	, cal	ls, warı	rants	s, op	ptions	5, C	onvertik	ole se	ecuri	ties)						
1. Title of	2.		3A. Deemed Execution D if any	Date, T	4. Transaction Code (Instr.		(Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and An of Securities Underlying					8. Price of	9. Numbe		10.	11. Nature			
Derivative Security	Conversio												Under	Underlying		Derivative Security	derivative Securitie	s	Ownership Form:	Beneficial	
(Instr. 3)	(Instr. 3) Price of (Month/Day/Ye			/Year)   8	B)		Securities Acquired		Derivative S (Instr. 3 and					(Instr. 5)	str. 5) Beneficia Owned	Ily Direct (D) or Indirect		Ownership (Instr. 4)			
	Security				(A) or Disposed									Following Reported		l` ´					
						of (D) (Instr. 3, 4 and 5)										Transacti (Instr. 4)					
				⊢		3, 4 and 3)			<u> </u>			Amount			(1130.4)						
															or						
									Date			Expiration		•	Number of						
	1		1	0	Code	V	(A)	(D)	Exer	rcisable	1	Date	Title	- 14	Shares		1			1	

05/24/2008<sup>(2)</sup>

(Right to Buy)<sup>(1)</sup> Explanation of Responses:

\$32.425

Option

1. These options were granted pursuant to an employee stock option plan in compliance with Rule 16b-3 and have tandem tax withholding rights.

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12,330

2. 33 1/3% of the options become exercisable on May 24, 2008, May 24, 2009 and May 24, 2010.

## Tarrant Sibley, p/o/a for Martin 05/25/2007

\$<mark>0</mark>

12,330

D

R. Trueb

05/23/2014

Commo

Stock

\*\* Signature of Reporting Person Date

12,330

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).

05/24/2007

\*\* 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.