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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | |
|--------------------------|-----------|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | |
| Estimated average burden | | | | | | |
| hours per response: | 0.5 | | | | | |

| | | | or Section 30(h) of the Investment Company Act of 1940 | | | | | |
|--|--|----------------|---|---|--|--|--|--|
| Name and Address of Reporting Person* Johnson Dolph | | | 2. Issuer Name and Ticker or Trading Symbol HASBRO, INC. [HAS] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify | | | | |
| (Last) C/O HASBRO, 1011 NEWPOR | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 02/23/2022 | EVP, Chief HR Resources Offcr | | | | |
| (Street) PAWTUCKET (City) | | 02861 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | |

| 1. Title of | Security (Ins | tr. 3) | 2. Transac Date (Month/Da | Exe ay/Year) if ar | Deemed cution Date, ny nth/Day/Year) | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned 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 | share) 02/23/2 | 2022 | | A ⁽¹⁾ | | 7,167 | A | \$0 | 49 |),755 | D | | |
| Common Stock (Par Value \$.50 per share) | | | share) 02/23/2 | 2022 | | F ⁽²⁾ | | 2,917 | D | \$93.74 | 46 | 5,838 | D | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | |
| 1. Title of | 2. | 3. Transaction | 3A. Deemed | 4. Transcation | 5. Number | 6. Date | | | 7. Title a | | | 9. Number | of 10. | 11. Nature | |

Expiration Date (Month/Day/Year) Derivative Conversion Date Execution Date, Transaction Amount of Derivative derivative Ownership of Indirect Security (Instr. 3) or Exercise Price of (Month/Day/Year) if any (Month/Day/Year) Derivative Security (Instr. 5) Securities Beneficially Code (Instr. Securities Form: **Beneficial** Securities Underlying Direct (D) Ownership Derivative Acquired or Indirect (I) (Instr. 4) Derivative Owned (Instr. 4) (A) or Disposed Security (Instr. 3 and 4) Security Following Reported of (D) (Instr. 3, 4 and 5) Transaction(s) (Instr. 4) Amount Number Expiration Date ν Title Code (A) (D) Exercisable Date Shares

Explanation of Responses:

- 1. Shares earned under performance share award granted March 14, 2019 which was contingent upon Hasbro's achievement of certain stated financial goals over a 3 year period performance period.
- 2. This represents payment of tax withholding using share withholding in connection with the above earned performance share award.

Matthew Gilman, P/O/A for **Dolph Johnson**

02/25/2022

** Signature of Reporting Person

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.