SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subj	ect 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 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

Estimated average burden		
hours per response:		0.5

1. Name and Address of Reporting Person [*] BATKIN ALAN R			2. Issuer Name and Ticker or Trading Symbol HASBRO INC [HAS]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				X	Director	10% Owner		
	(First) K CAPITAL MAI		3. Date of Earliest Transaction (Month/Day/Year) 09/30/2011		Officer (give title below)	Other (specify below)		
399 PARK AVENUE, 10TH FLOOR		JR	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	(Check Applicable			
(Street) NEW YORK	NY	10022		X	Form filed by One Repo Form filed by More than Person	0		
(City)	(State)	(Zip)						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2A. Deemed Execution Date, if any (Month/Day/Year)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 au 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
		Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(1150.4)

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)	Code (Transaction of Expirati Code (Instr. B) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		Expiration Da	ration Date Amount of		biration Date Amount of http://Day/Year) Securities Underlying Derivative Security		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Phantom Stock Units ⁽¹⁾	\$0 ⁽²⁾	09/30/2011		Α		1,424		(3)(4)	(3)(4)	Common Stock	1,424	\$32.61	50,059 ⁽⁵⁾	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 compliance with Rule 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 12/31/2011 (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 12/31/2012 (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 is immediately vested.

5. Does not include 3,055 units acquired by the reporting person pursuant to the Plan prior to August 15, 1996.

Tarrant Sibley, P/O/A for Alan	10/04/2011
	10/04/2011

R. Batkin

** 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.