П

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB Number: 3235-0287 |                          |  |  |  |  |  |  |  |  |  |  |  |
|-----------------------|--------------------------|--|--|--|--|--|--|--|--|--|--|--|
| Estimate              | Estimated average burden |  |  |  |  |  |  |  |  |  |  |  |
|                       | r response:              |  |  |  |  |  |  |  |  |  |  |  |

IF.

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 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person*            |  |         | 2. Issuer Name <b>and</b> Ticker or Trading Symbol<br>HASBRO, INC. [HAS] |           |   |  |  |        |                   |         | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable) |          |   |   |   |   |                |               |
|---|--|---------|--|-----------|---|--|--|--------|-------------------|---------|--|----------|---|---|---|---|----------------|---------------|
| Zecher Linda Kay                                    |  |         |  |           |   |  | 1  |        |                   |         |  | X Direct | or  |   | 10% 0   | Dwner   |                |               |
| (Last)<br>C/O HA                                    |  |         |  | (Middle)  |   | 3. Date of Earliest Transaction (Month/Day/Year)<br>12/31/2022 |  |        |                   |         |  |          |   | Office<br>below   | r (give title<br>')   |   | Other<br>below | (specify<br>) |
| 1011 NEWPORT AVENUE                                 |  |         |  |           | 4. If Ar  | 4. If Amendment, Date of Original Filed (Month/Day/Year)       |  |        |                   |         |  |          | 6. Individual or Joint/Group Filing (Check Applicable Line) |   |   |   |                |               |
| (Street)<br>PAWTU                                   | CKET   | RI      |  | 02861     |   |  |  |        |                   |         |  |          |   | X Form<br>Form  | Form filed by One Reporting Person<br>Form filed by More than One Reporting<br>Person |   |                |               |
| (City)  |  | (State) |  | (Zip)     |   |  |  |        |                   |         |  |          |   |   |   |   |                |               |
|   |  |         | Tab  | le I - No | n-Deriv   | ative S  | ecurities Ac                                   | quired | , Dis             | posed o | of, c  | or Ben   | eficial   | ly Owne   | d   |   |                |               |
| 1. Title of Security (Instr. 3)<br>Date<br>(Month/D |  |         |  |           | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Yea | Code   | Transaction Disposed<br>Code (Instr. 5)        |        |                   |         |  |          |   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |                |               |
|   |  |         |  |           |   |  |  | v      | Amount (A) or (D) |         | Price  | Transad  | Transaction(s)<br>(Instr. 3 and 4)                          |   |   | (Instr. 4)  |                |               |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned   (e.g., puts, calls, warrants, options, convertible securities) |         |  |           |   |  |  |        |                   |         |  |          |   |   |   |   |                |               |
| 1. Title of   | 2  | 3. Tra  | nsaction   | 3A. Deem  | ed  | 4.   | 5. Number 6. Date Exercisable and 7. Title and |        |                   |         |  |          |   | 8. Price of   | 9. Numbe  | rof   | 10.            | 11. Nature    |

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transa<br>Code (<br>8) |   | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |     | 7. Title and<br>Amount o<br>Securities<br>Underlyin<br>Derivative<br>(Instr. 3 ar | f<br>9<br>Security | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |  |
|---|---|--|---|------------------------------|---|---|-----|---|--------------------|---|--|--|--|---|--|
|   |   |  |   | Code                         | v | (A)   | (D) | Date<br>Exercisable   | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of<br>Shares   |  |  |   |  |
| Phantom<br>Stock<br>Units <sup>(1)</sup>            | \$0.0 <sup>(2)</sup>  | 12/31/2022                                 |   | Α                            |   | 102   |     | (3)   | (3)                | Common<br>Stock                                     | 102  | \$61.01  | 8,961  | 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.

**Remarks:** 

#### Matthew Gilman, P/O/A for Linda K. Zecher

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  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.

01/04/2023

Date