FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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	OMB APPRO	OVAL					
	OMB Number:	3235-0287					
	Estimated average burden						
l	hours per response:	0.5					

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

1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol HASBRO INC [HAS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
CONNORS JOHN M JR					[Direct	or		10% O\	vner	
(Last) (First) (Middle) 13 CENTENNIAL DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 06/30/2005								Officer (give title below)			Other (specify below)			
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) PEABOI	OY M	A	09160										,	X Form filed by One Reporting Person					
(City)	(5)	tate) ((7in)	-									Form filed by More than One Reporting Person						
(City)	(3	iale)	(Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,			Code (In	Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)			4 and Securiti Benefic		ies Fori ially (D) (Following (I) (I		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	t (A) or (D)		ice	Transac (Instr. 3	ction(s)			(111311.4)	
	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)	ative Conversion or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Execution Date, if any (Month/Day/Year) Transaction Code (Instr. 8) Security Security Code (Instr. 8) Security Code (Instr. 8) Security Code (Instr. 8) Code				Derivative Securities Underlying Derivative Securities Underlying Derivative Securities Of (Instr. 3 and 4)						8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	(A) (D)		Date Exercisable	Exp Dat	piration te	Title	Amou or Numb of Share	er						
Phantom Stock Units ⁽¹⁾	\$0 ⁽²⁾	06/30/2005		A		928		(3)(4)		(3)(4)	Common Stock	928	3	\$20.79	4,594		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 41 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 41 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 John M. Connors, Jr.

07/06/2005

** 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.