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
bligations may continue. See
nstruction 1(b).

FORM 4

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								
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						() ()				
1. Name and Addre	•	g Person [*]	2. Issuer Name and Ticker or Trading Symbol HASBRO INC [HAS]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
BATKIN ALAN R			HASDRO INC [HAS]	X	Director	10% Owner				
,			—		Officer (give title	Other (specify				
		(Middle)	3. Date of Earliest Transaction (Month/Day/Year)		below)	below)				
399 PARK AVI	ENUE		03/31/2016							
10TH FLOOR										
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indi Line)	6. Individual or Joint/Group Filing (Check Applicable					
(Street)				X	V Form filed by One Departing Deveen					
NEW YORK	NY	10022			Form filed by More that	an One Reporting Person				
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										

6. Ownership Form: Direct (D) or Indirect 1. Title of Security (Instr. 3) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 2. Transaction 2A. Deemed 5. Amount of Securities 7. Nature of s. Transaction Code (Instr. 8) Execution Date Securities Beneficially Indirect Beneficial (Month/Day/Year) (Month/Day/Year) **Owned Following** (I) (Instr. 4) Ownership Reported Transaction(s) (Instr. 4) (A) or (D) v Price Code Amount (Instr. 3 and 4)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(eigi, pare, cane, marane, epiterie, contention coounties)															
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)	4. Transa Code (8)		of Deriv Secu Acqu (A) o Dispe of (D	r osed) 7. 3, 4	Expiration Date (Month/Day/Year) S		e and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	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⁾	03/31/2016		A		839		03/31/2016 ⁽³⁾⁽⁴⁾	03/31/2016 ⁽³⁾⁽⁴⁾	Common Stock	839	\$80.1	70,774 ⁽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. Vesting of 19 units will occur on the earlier of 12/31/2016 (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 19 units will occur on the earlier of 12/31/2017 (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.

4. Units are settled only in cash and are payable after the reporting person ceases to be a director.

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



04/04/2016

** Signature of Reporting Person

Batkin

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.