FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |  |  |
| 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*  Gersh Lisa |  |  |   |                                 | 2. Issuer Name and Ticker or Trading Symbol HASBRO INC [ HAS ] |   |   |                 |   |   |  |  |   | heck all app   | tor                                      |   | 0% Ov                                 | vner        |
|--|--|--|---|---------------------------------|--|---|---|-----------------|---|---|--|--|---|--|--|---|---------------------------------------|-------------|
|  | SBRO, INC  | 2.   | (Middle)  |                                 | 3. Date of Earliest Transaction (Month/Day/Year) 03/31/2018    |   |   |                 |   |   |  |  |   | belov  | er (give title                           |   | Other (s<br>elow)                     | specify     |
| 1011 NEWPORT AVENUE                                  |  |  |   |                                 | 4. If Amendment, Date of Original Filed (Month/Day/Year)       |   |   |                 |   |   |  |  | 6. Individual or Joint/Group Filing (Check Applicable Line) |  |  |   |                                       |             |
| (Street) PAWTUCKET RI 02861                          |  |  |   |                                 |  |   |   |                 |   |   |  | X Form filed by One Reporting Person  Form filed by More than One Reporting Person |   |  |  |   |                                       |             |
| (City)   | (S   | tate) (                                    | (Zip)   |                                 |  |   |   |                 |   |   |  |  |   |  |  |   |                                       |             |
|  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |  |   |                                 |  |   |   |                 |   |   |  |  |   |  |  |   |                                       |             |
| Date   |  |  |   | 2. Transac<br>Date<br>(Month/Da | Execution Date   |   |   | Code (Instr. 5) |   |   |  | nd Securit<br>Benefic  | ies<br>cially<br>Following                                  | 6. Owners<br>Form: Dir<br>(D) or Indi<br>(I) (Instr. 4   | ect<br>rect<br>)                         | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                                       |             |
|  |  |  |   |                                 |  |   |   |                 | Code  | v | Amount   | (A) (D)  | Price   | Transa   | ction(s)<br>3 and 4)                     |   |                                       | (111541. 4) |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |   |                                 |  |   |   |                 |   |   |  |  |   |  |  |   |                                       |             |
| 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 Da<br>if any<br>(Month/Day/ | ate, Tr                         | e, Transac<br>Code (I  |   | 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) |                 | 6. Date Exer<br>Expiration I<br>(Month/Day/ |   | 7. Title an<br>Amount o<br>Securities<br>Underlyin<br>Derivative<br>(Instr. 3 ar | f<br>g<br>Security   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)         | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | Own<br>Forn<br>Direc<br>or In<br>(I) (Ir | ership<br>i:<br>ct (D)<br>direct<br>estr. 4)                      | Beneficial<br>Ownership<br>(Instr. 4) |             |
|  |  |  |   |                                 | ode  | v | (A) (D)   |                 | Date<br>Exercisable                         |   | xpiration<br>ate   | Title  | Amount<br>or<br>Number<br>of<br>Shares                      |  |  |   |                                       |             |
| Phantom<br>Stock<br>Units <sup>(1)</sup>             | \$0 <sup>(2)</sup>   | 03/31/2018                                 |   |                                 | A  |   | 553   |                 | (3)(4)                                      |   | (3)(4)   | Common<br>Stock  | 553   | \$84.3   | 19,649                                   |   | 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 19 units will occur on the earlier of 12/31/2018 (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 12/31/2019 (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 Lisa

04/03/2018

Gersh

\*\* 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.