FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasimigton,	D.C.	20040

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

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Name and Address of Reporting Person* Nyman Eric				2. Issuer Name and Ticker or Trading Symbol HASBRO, INC. [HAS]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	(Fi SBRO, INC	•	(Middle)		3. Date of Earliest Transaction (Monti 03/11/2021						Day/Year)			-	below)		be	Other (s below) Officer & CO	
1011 NE	WPORT A	VENUE			1 If	f Ame	andment	Date (of Original	Filed	(Month/D	av/Vea	ar)	6.11	ndividual or	loint/Grou	p Filing (Che	rk Ann	licable
(Street)	CKET R	ſ	02861		"	AIIIC	marrient,	Date	or Original	riicu	(WOTHIND	шулгс	u)	Line	e) X Form t Form t	filed by On- filed by Mo	e Reporting I	Persor	,
(City)	(S	tate)	(Zip)												Persoi	1			
		Tab	le I - Nor	n-Deriv	ative	Se	curitie	s Ac	quired,	Disp	osed o	of, or	Bene	eficial	ly Owned	d			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Code (Instr. 5		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Benefici Owned I	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	t o	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)						
Common	Stock (Par	Value \$.50 per s	share)	03/11	1/2021				A		2,21	8	A	\$ <mark>0</mark>	25,394		D		
Common Stock (Par Value \$.50 per share)													30	4.38	I ⁽¹⁾	h tl b o E	chares held for he henefit f Brooke Jyman		
Common Stock (Par Value \$.50 per share)														30.	4.38	I ⁽²⁾	h tl b	hares held for he henefit of Ava Nyman	
		٦	Гable II -						uired, D , option						Owned				
		Transa Code (I		ction of Ex		Expiration	. Date Exercisable and xpiration Date Month/Day/Year)		Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		mount	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	Owne S Form: Direct or Ind (I) (Ins	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)		Date Exercisable		xpiration ate	Title	N of	umber					
Option (Right to Buy)(3)	\$96.06	03/11/2021			A		5,545		(4)	03	3/10/2028	Comi		5,545	\$0	5,545	5 [

Explanation of Responses:

- 1. The shares are held for Brooke Nyman, the child of the reporting person, through a custodial account established pursuant to the UTMA for which the reporting person's spouse serves as custodian. The reporting person disclaims beneficial ownership of all of these shares except to the extent of his pecuniary interest therein.
- 2. The shares are held for Ava Nyman, the child of the reporting person, through a custodial account established pursuant to the UTMA for which the reporting person's spouse serves as custodian. The reporting person disclaims beneficial ownership of all of these shares except to the extent of his pecuniary interest therein.
- 3. These options were granted under an employee stock option plan in accordance with Rule 16b-3 and have tandem tax withholding rights.
- 4. 33 1/3% of the options become exercisable on the first anniversary of the date of grant and an additional 33 1/3% of the options become exercisable on each anniversary of the date of grant thereafter.

Matthew Gilman, P/O/A for

03/15/2021

Eric Nyman

** 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.