Edgar Filing: Gersh Lisa - Form 4

Gersh Lisa Form 4 May 21, 2018 FORM Check thi if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	4 UNITED S s box er 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.	ENT OF (suant to Sec a) of the Pul	Wasl CHAN(ction 16 blic Uti	hington, GES IN F SECURI 5(a) of the	D.C. 205 BENEFI ITIES Securiti ing Com	549 CIA ies Ez ipany	L OW	COMMISSION NERSHIP OF ge Act of 1934, of 1935 or Section 40	N OMB Number: Expires: Estimated burden hou response	urs per	
 (Print or Type Responses) 1. Name and Address of Reporting Person [*] 2. Issuer Symbol 				er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
	Н	HASBRO INC [HAS]					(Check all applicable)				
			/Ionth/Da	of Earliest Transaction /Day/Year) 2018				_X_Director 10% Owner Other (specify below) below)			
	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
PAWTUCK	ET, RI 02861								More than One R		
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed (of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deen Execution any (Month/D)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
Common				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			
Stock (Par Value \$.50 per share)	05/17/2018			А	1,805	Α	\$0	21,479	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D)		ate	7. Title Amour Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Gersh Lisa								
C/O HASBRO, INC.	x							
1011 NEWPORT AVENUE	Λ							
PAWTUCKET, RI 02861								
Signatures								
Tarrant Sibley, P/O/A for Lisa								
Gersh		05/21/2018	;					
**Signature of Reporting Person		Date						
Explanation of Responses:								

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.