Edgar Filing: Gersh Lisa - Form 4

Gersh Lisa Form 4										
July 03, 2018										
FORM	4								PPROVAL	
	UNITED	STATES		RITIES A shington			E COMMISSION	N OMB Number:	3235-0287	
Check this if no longe subject to Section 16 Form 4 or Form 5			RITIES	Expires: Estimated burden hou response	urs per					
obligation may contin <i>See</i> Instruct 1(b).	s Section 17(a) of the l	Public U	Itility Ho	lding Cor		nge Act of 1934, a of 1935 or Section 1940	on		
(Print or Type R	esponses)									
1. Name and Address of Reporting Person <u>*</u> Gersh Lisa			2. Issuer Name and Ticker or Trading Symbol HASBRO INC [HAS]				5. Relationship of Reporting Person(s) to Issuer			
				_			(Check all applicable)			
(Last) (First) (Middle) C/O HASBRO, INC., 1011 NEWPORT AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 06/30/2018			X_ Director 10% Owner Officer (give title 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 Form filed by More than One Reporting 				
PAWTUCKI	ET, RI 02861						Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Securities A	Acquired, Disposed of	of, or Beneficia	lly Owned	
	2. Transaction Date Month/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4	(A) or of (D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Amount					
Reminder: Repo	ort on a separate line	e for each cl	ass of sec	urities bene	-	-	-	ation of	NEC 1474	
					inforn requii	nation con red to resp iys a curre	spond to the colle tained in this form ond unless the for ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	Derivativ
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Security

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(Instr. 3)	Price of Derivative Security	(Month/Day/Yea	ar) (Instr. 8)	Secur Acqui (A) or Dispo of (D) (Instr. and 5)	ired r osed) . 3, 4,					(Instr. 5)
			Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Unit ⁽¹⁾	\$ 0 <u>(2)</u>	06/30/2018	А	522		(3)(4)	(3)(4)	Common Stock	522	\$ 92.3

Reporting Owners

Reporting Owner Name / Address	Relationships						
1 0	Director	10% Owner	Officer	Other			
Gersh Lisa C/O HASBRO, INC. 1011 NEWPORT AVENUE PAWTUCKET, RI 02861	Х						
Signatures							
Tarrant Sibley, P/O/A for Lisa Gersh		07/03/2018	3				
**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).
- (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 17 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 17 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.

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.