FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

asnington, D.C. 20549

OMB APPROVAL								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

1. Name and Address of Reporting Person* <u>Gersh Lisa</u>					2. Issuer Name and Ticker or Trading Symbol HASBRO INC [HAS]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) C/O MARTHA STEWART LIVING OMNIMEDIA 601 WEST 26TH STREET, 9TH FLOOR				EDIA	3. Date of Earliest Transaction (Month/Day/Year) 09/30/2011											Office below	(give title	Filip	Other (s below)	specify
(Street) NEW YORK NY 10001 (City) (State) (Zip)					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - Non-	-Deriva	ative	Sec	curiti	es A	cqu	ired, D	isp	osed	of, or Be	enefic	cially	Owne	d			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		е,	r, Transaction Dispose Code (Instr. 5)		ities Acqui d Of (D) (In		4 and Securit Benefic Owned		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Ī	Code V	,	Amount	unt (A) or P		ice	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, T	4. Transactio Code (Inst 8)				6. Date Exercisable Expiration Date (Month/Day/Year)			le and	e and 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		D S (I	Price of erivative ecurity 1str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dir or	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e ercisable	Exp Dat	oiration te	Title	Amou or Numb of Share	er					
Phantom Stock Units ⁽¹⁾	\$0 ⁽²⁾	09/30/2011			A		863			(3)(4)		(3)(4)	Common Stock	863	3	\$32.61	3,054		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 38 units will occur on the earlier of 12/31/2011 (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 38 units will occur on the earlier of 12/31/2012 (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 is immediately vested.

<u>Tarrant Sibley, P/O/A for Lisa</u> Gersh

10/04/2011

Gersn

** 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.