FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasnington,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-02									
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* Stoddart Richard S					2. Issuer Name and Ticker or Trading Symbol HASBRO, INC. [HAS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)	(F SBRO, INC	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/31/2024										Officer (give title X Other (specify below) Chair of the Board					
1027 NEWPORT AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)	CKET R	I	02861											X	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(\$	State)	(Zip)		Ru	ıle 1	0b5	-1(c) Trans	act	ion Ind	dication	1							
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intersatisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									that is intende	ed to										
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				ate	Execution Date		e, Transaction Dispose Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4 a		r ind		es Formally (D) (Following (I) (I		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D) Pr		e		orted saction(s) r. 3 and 4)			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 Da if any (Month/Day/Y	Co	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		D S (I	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	ode	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amour or Number of Shares	r						
Phantom Stock Units ⁽¹⁾	\$0 ⁽²⁾	03/31/2024		1	A		191		(3)		(3)	Common Stock	191		\$56.52	15,608	8	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 stock and are issued after the reporting person ceases to be a director.

Remarks:

Matthew Gilman, P/O/A for Richard S. Stoddart

04/02/2024

Date

** Signature of Reporting Person

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.