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HASBRO INC Form 4												
April 04, 2017												
FORM 4	UNITED	STATES	SECU	RITIES /	AND EX	CHANGE	E COMMISSIO	NT.	PPROVAL			
~		0111120		shington				Number:	3235-0287			
Check this box if no longer		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF										
subject to Section 16. Form 4 or				SECUI	Estimated burden hou response	urs per						
Form 5 obligations may continue. See Instruction 1(b).	Section 17(a) of the l	Public U	tility Hol	ding Co		nge Act of 1934, t of 1935 or Secti 1940					
(Print or Type Respo	onses)											
1. Name and Addres Davis Sir Crispi	Symbol	er Name an RO INC [Trading	5. Relationship of Reporting Person(s) to Issuer							
(Last)	(First) (1	irst) (Middle) 3. Date of Earliest Transaction						(Check all applicable)				
C/O HASBRO, INC., 1011 NEWPORT AVENUE			(Month/Day/Year) 03/31/2017				X_ Director 10% Owner Officer (give title Other (specify below) below)					
	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)				ıl	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person						
PAWTUCKET,	RI 02861						Form filed by Person	More than One R	eporting			
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned			
	ansaction Date nth/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4	(A) or of (D)	5. Amount of 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)			
				Code V		(D) Price						
Reminder: Report of	n a separate line	e for each cl	ass of sec	urities bene	•	•						
					inforr requi	nation con red to resp ays a curre	spond to the colle tained in this forn ond unless the fo 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/Year)	(Instr.		Securi Acqui (A) or Dispos 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 Units ⁽¹⁾	\$ 0 <u>(2)</u>	03/31/2017		А		331		(3)(4)	(3)(4)	Common Stock	331	\$ 99.8

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Davis Sir Crispin C/O HASBRO, INC. 1011 NEWPORT AVENUE PAWTUCKET, RI 02861	X						
Signatures							
Tarrant Sibley, P/O/A Sir Crisp Davis	oin	04/04/2	2017				

**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 14 units will occur on the earlier of 12/31/2017 (provided 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 14 units will occur on the earlier of 12/31/2018 (provided 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.