### Edgar Filing: HASBRO INC - Form 4

HASBRO INC Form 4 May 31, 2016 <b>FORM 4</b> Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	OMB Number: Expires: Estimated a burden hour response	•						
(Print or Type Responses)								
1. Name and Address of Reporting Pers Billing Duncan	Symbol	Name and Tic O INC [HAS		8	5. Relationship of I ssuer			
(Last) (First) (Midd C/O HASBRO, INC. 1011 NEWPORT AVENUE	e) 3. Date of (Month/Da 05/26/20	-	action		(Check all applicable) <u></u> Director 10% Owner <u></u> Officer (give title Other (specify below) below) EVP, Chief Gbl Ops & Bus Dvpmt			
(Street) PAWTUCKET, RI 02861		ndment, Date O th/Day/Year)	Driginal		5. Individual or Joi Applicable Line) _X_ Form filed by Ou Form filed by Mo Person	ne Reporting Per	rson	
(City) (State) (Zip	Table	e I - Non-Deriv	vative Secu		ired, Disposed of,	or Beneficiall	y Owned	
(Instr. 3) any	cution Date, if ( onth/Day/Year) (	Transaction E	Disposed of str. 3, 4 and (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock (Par Value \$.50 per share)		S 700		\$ 87.2501 (1)	58,416.885	D		
Common Stock (Par Value \$.50 per share) 05/27/2016		S 2,8	514 D	\$ 87.2825 (2)	55,602.885	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

1

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# 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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	<b>T</b> . 1	or		
						Exercisable	Date	Title	Number		
					$(\mathbf{A})$ $(\mathbf{D})$				of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Billing Duncan C/O HASBRO, INC. 1011 NEWPORT AVEN PAWTUCKET, RI 02861	NUE		EVP, Chief Gbl Ops & Bus Dvpmt				
Signatures							
Tarrant Sibley, P/O/A for Duncan Billing	05/31/2016						
**Signature of Reporting Person	Date						
Explanation of Posponso	<u>.</u> .						

### **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).

The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$87.25
 (1) to \$87.2501, inclusive. The reporting person undertakes to provide to Hasbro, Inc., any security holder of Hasbro, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote (1).

The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$87.25 to \$87.50, inclusive. The reporting person undertakes to provide to Hasbro, Inc., any security holder of Hasbro, Inc. or the staff of the

(2) The reporting person undertakes to provide to frashro, inc., any security notice of frashro, inc. of the start of the

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.