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Gersh Lisa												
Form 4 January 03, 1	2013											
FORM									PPROVAL			
	UNITED	STATES		RITIES A Ashington			E COMMISSION	N OMB Number:	3235-028	37		
Check th if no lon	aer							Expires:	January 3 ⁻ 200			
subject to Section 16. SECURITIES Form 4 or								Estimated burden hou response	average Irs per	.5		
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17	(a) of the	Public U	Jtility Hol	ding Cor		nge Act of 1934, of 1935 or Section 940	on				
(Print or Type	Responses)											
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					
		AC 11		L	-		(Check all applicable)					
(Last) (First) (Middle) C/O MARTHA STEWART LIVING OMNIMEDIA, 601 WEST 26TH STREET, 9TH FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 12/31/2012				X_ Director 10% Owner Officer (give title Other (specify below) below)					
	(Street)		4. If Am	endment, D	ate Origina	ıl	6. Individual or Joint/Group Filing(Check					
				Filed(Month/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
NEW YOR	K, NY 10001						Person	More than One K	eporung			
(City)	(State)	(Zip)	Tał	ole I - Non-l	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Reminder: Rer	oort on a separate lin	e for each cl	ass of sec	urities bene	ficially ow	ned directly	or indirectly.					
	·				Perso inforn requir	ns who res nation cont red to resp nys a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)			
	Tab					posed of, or convertible :	Beneficially Owned securities)	I				

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

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		Security (Instr. 5)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units ⁽¹⁾	\$ 0 <u>(2)</u>	12/31/2012		А		995		(3)(4)	(3)(4)	Common Stock	995	\$ 35.9

Reporting Owners

Reporting Owner Name / Address	Relationships					
r	Director	10% Owner	Officer	Other		
Gersh Lisa C/O MARTHA STEWART LIVING OMN 601 WEST 26TH STREET, 9TH FLOOR NEW YORK, NY 10001	IMEDIA	X				
Signatures						
Tarrant Sibley, P/O/A for LisaGersh0	1/03/2013					

**Signature of Reporting Person

Date

Reporting Person

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 39 units will occur on the earlier of 12/31/2013 (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.