FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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

Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol JAKKS PACIFIC INC [ "JAKK" ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
BLATTE DAVID C						JAKO FACIFIC IVO [ JAKK ]									X Director			10% O		
(Last) (First) (Middle) C/O JAKKS PACIFIC, INC.						3. Date of Earliest Transaction (Month/Day/Year) 01/01/2006									Office below	r (give title )		Other (s below)	specify	
22619 PACIFIC COAST HIGHWAY						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or	Joint/Group	Filin	g (Check Ap	pplicable	
(Street) MALIBU CA 90265															Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City) (State) (Zip)																				
		Tab	le I - No	n-Deriv	ative/	Se	curiti	es Ac	quired,	Dis	posed (	of, o	r Ben	eficia	lly Owne	d				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						)   E	Execution f any	A. Deemed xecution Date, any Month/Day/Year)		Transaction Dispo		urities Acquired (A) sed Of (D) (Instr. 3, 4			Benefic	ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D) Pr		Price	Transac (Instr. 3	ction(s)			(111511. 4)	
Common Stock 01/01/2					L/2006	2006		A		5,732	2 <sup>(1)</sup> A \$2		\$20.	94 7	7,732		D			
		T							uired, D s, optior						/ Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date, 1	4. Transaction Code (Instr. 8)		n of Ex		Expiration	. Date Exercisable and xpiration Date Month/Day/Year)		7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	OI N	umber						
Options	\$19.27								07/01/200	5 07	7/01/2015	Com		7,500		7,500		D		
Options	\$22.11								01/01/200	5 0	1/01/2015	Com		7,500		7,500		D		
Options	\$20.55								07/01/200	4 0	7/01/2014	Com		7,500		7,500		D		
Options	\$13.15								01/01/200	4 0	1/01/2014	Com Sto		7,500		7,500		D		
Options	\$13.39								07/01/200	3 07	7/01/2013	Com		7,500		7,500		D		
Options	\$13.47								01/01/200	3 0	1/01/2013	Com		7,500		7,500		D		
Options	\$17.26								07/01/200	2 07	7/01/2012	Com		7,500		7,500		D		
Options	\$18.95								01/01/200	2 0:	1/01/2012	Com		7,500		7,500		D		
Options	\$11.5625								01/15/200	1 0	1/15/2011	Com	mon 2	2,500		22,500	)	D		

## **Explanation of Responses:**

1. Issued under the Company's 2002 Stock Award and Incentive Plan. In accordance with such Plan, the shares so issued may not be sold, mortgaged, pledged, transferred or otherwise encumbered prior to January 1, 2007.

/s/ David C. Blatte

01/03/2006

\*\* 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.