FORM 3

UGLAND HOUSE PO BOX 309

1. Name and Address of Reporting Person*

E9

(State)

(First)

C/O OASIS MGMT (HONG KONG) LLC, MAN YEE BUILDING, 68 DES VOEUX RD

KY1-1104

(Zip)

(Middle)

(Street) **GRAND**

(City)

(Last)

CAYMAN

Fischer Seth

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

OMB APPROVAL

OMB Number: 3235-0104

					SECURITIES			ll l	r response: 0.5
					n 16(a) of the Securities Exchange a of the Investment Company Act of 1				
1. Name and Address of Reporting Person* Oasis Management Co Ltd.			2. Date of Eve Requiring Stat (Month/Day/Ye 04/27/2015	ement	3. Issuer Name and Ticker or Tra JAKKS PACIFIC INC				
(Last) (First) (Middle) UGLAND HOUSE, PO BOX 309					Relationship of Reporting Pers (Check all applicable) Director X	10% Owne	(Mor	5. If Amendment, Date of Original Filed (Month/Day/Year)	
(Street) GRAND CAYMAN	E9	KY1-1104			Officer (give title below)	Other (spe below)	, , , , , , , , , , , , , , , , , , , ,	Form filed b	t/Group Filing (Check by One Reporting Person by More than One Person
(City)	(State)	(Zip)							
			Table I - No	on-Deriva	ative Securities Beneficial	lly Owned			
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownersh Form: Direct or Indirect ((Instr. 5)	t (D) (Instr.	ure of Indirect Beneficial Ownership 5)	
Common Stock, par value \$0.001 ("Common Stock")				546,585	I	See footnotes ⁽¹⁾⁽²⁾			
		(6			ve Securities Beneficially ants, options, convertible		s)		
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiratior Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	
Convertible Senior Notes			07/24/2013	08/01/2018	Common Stock	1,276,332	8.7438	I	See footnotes ⁽¹⁾⁽²⁾
Convertible Senior Notes			06/09/2014	06/01/2020	Common Stock	907,911	9.6375	I	See footnotes ⁽¹⁾⁽²⁾
(Last)	ddress of Report	O Ltd.	le)	_					
(Street) GRAND CAYMAN	E9	KY1	-1104						
(City)	(State)) (Zip)		_					
1. Name and Ac	-	ting Person* Master Fund Ltd	<u> </u>						
(Last) (First) (Middle)									

(Street) CENTRAL	K3	0
(City)	(State)	(Zip)

Explanation of Responses:

1. The securities to which this filing relates are held directly by Oasis Investments II Master Fund Ltd., a Cayman Islands exempted company (the "Oasis II Fund"). Oasis Management Company Ltd., a Cayman Islands exempted company (the "Investment Manager"), is the investment manager of Oasis II Fund. Seth Fischer, is responsible for the supervision and conduct of all investment activities of the Investment Manager, including all investment decisions with respect to the assets of the Oasis II Fund.

2. The filing of this statement shall not be deemed an admission that any of the Reporting Persons is the beneficial owner of the securities reported herein for purposes of Section 16 of the Securities Act of 1934, as amended, or otherwise. Each of the Reporting Persons expressly disclaims beneficial ownership of the securities reported herein except to the extent of its or his pecuniary interest therein.

/s/ Oasis Management

Company Ltd., By: Phillip 06/03/2015

Meyer, its General Counsel

/s/ Oasis Investments II Master

Fund Ltd., By: Phillip Meyer, 06/03/2015

its Director

<u>/s/ Seth Fischer</u> <u>06/03/2015</u>

** 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 5 (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.