

OMB APPROVAL	
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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Benefit Street Partners LLC</u> _____ (Last) (First) (Middle) 9 WEST 57TH STREET, SUITE 4920 _____ (Street) NEW YORK NY 10019 _____ (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 07/21/2021	3. Issuer Name and Ticker or Trading Symbol <u>JAKKS PACIFIC INC [ JAKK ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) _____ 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	773,139	I	See Footnotes <sup>(1)(2)</sup>
Series A Senior Preferred Stock	104,823	I	See Footnotes <sup>(1)(2)</sup>

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

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 Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
2023 Convertible Senior Notes	08/09/2019	09/01/2021	Common Stock	560,753	5.647	I	See Footnotes <sup>(1)(2)</sup>

1. Name and Address of Reporting Person* <u>Benefit Street Partners LLC</u> _____ (Last) (First) (Middle) 9 WEST 57TH STREET, SUITE 4920 _____ (Street) NEW YORK NY 10019 _____ (City) (State) (Zip)		
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1. Name and Address of Reporting Person* <u>Gahan Thomas</u> _____ (Last) (First) (Middle) WEST 57TH STREET, SUITE 4920 _____ (Street) NEW YORK NY 10019 _____ (City) (State) (Zip)		
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**Explanation of Responses:**

1. The reported securities are held by one or more private funds and accounts (the "BSP Funds"). Benefit Street Partners L.L.C. ("BSP") is a registered investment adviser under Section 203 of the Investment Advisers Act of 1940, as amended. BSP serves as the investment adviser to each of the BSP Funds. Mr. Gahan controls BSP in his role as Chief Executive Officer of BSP's sole managing member. As a result, each of BSP and Mr. Gahan may be deemed to beneficially own the securities held by the BSP Funds. Each reporting person disclaims beneficial ownership of these securities, except to the extent of its or his pecuniary interest therein, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or for any other purpose.

2. Pursuant to the certificate of designations for JAKKS Pacific, Inc.'s (the "Issuer") Series A Senior Preferred Stock and a voting agreement between the Issuer and certain holders party thereto, BSP has certain director designation rights with respect to the Issuer's board of directors. Matthew Winkler currently serves as BSP's designee.

/s/ Alexander McMillan,  
Authorized Signatory, 07/26/2021  
Benefit Street Partners  
L.L.C.

/s/ Thomas J. Gahan 07/26/2021

\*\* 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.**