### Edgar Filing: HERSHEY CO - Form 4

Form 4 December 0 FORM Check th if no lon subject t Section Form 4 Form 5 obligation may con	December 03, 2014 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction						OMB Number: Expires: Estimated a burden hour response	•		
(Print or Type	Responses)									
Wege D Michael Symb			2. Issuer Name <b>and</b> Ticker or Trading Symbol HERSHEY CO [HSY]				5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3. (M			3. Date of Earliest Transaction (Month/Day/Year) 12/01/2014				(Check all applicable) <u></u> Director 10% Owner <u></u> Officer (give title 0ther (specify below) SVP, Chief Growth & Marketing			
HERSHEY	If Amendment, l led(Month/Day/Ye	Amendment, Date Original Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> <li>Person</li> </ul>				
(City)	(State)	(Zip)	Table I - Non	-Derivativ	e Secu	rities Acqu	iired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)		ansaction Date 2A. Deemed hth/Day/Year) Execution Date, if any (Month/Day/Year)				cquired d of (D) 5) Price	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	12/01/2014		М	770	A	\$ 52.3	24,241	D		
Common Stock	12/01/2014		S <u>(1)</u>	770	D	\$ 100.24	23,471	D		
Common Stock	12/02/2014		S <u>(1)</u>	450	D	\$ 100.02	23,021	D		
Common Stock							835.0536 <u>(2)</u>	Ι	401(k) Plan	

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

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# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	onof Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Non-qualified Stock Option (Right to Buy)	\$ 52.3	12/01/2014		М		770	(3)	02/15/2016	Common Stock	770

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1 0	Director	10% Owner	Officer	Other			
Wege D Michael 100 CRYSTAL A DRIVE HERSHEY, PA 17033			SVP, Chief Growth & Marketing				
Signatures							
/s/ James Turoff, Agent for D. M	lichael	1	2/03/2014				

Wege <u>\*\*</u>Signature of Reporting Person

Date

### **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) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 4, 2014.

The total amount of securities reported as indirectly owned by the reporting person represents a reduction of 4.0635 shares allocated to the reporting person's account in the Company's 401(k) Plan ("Plan") as of November 30, 2014. To manage liquidity needs of the Plan,

(2) the Plan trustee from time-to-time maintains a lower overall share balance (versus cash) in the Plan, which in this instance resulted in a reduction in the number of shares allocated to the reporting person's account when compared to the reporting person's Form 4 filed on December 1, 2014. The information is based on a report dated December 1, 2014, provided by the Plan trustee.

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(3) The options vest according to the following schedule: 25% vested on February 16, 2007, 25% vested on February 16, 2008, 25% vested on February 16, 2009 and 25% vested on February 16, 2010.

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.