FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Buck Michele						2. Issuer Name and Ticker or Trading Symbol HERSHEY CO [HSY]								Relationship heck all appl Direct	icable)	ng Pers	son(s) to Iss 10% Ow Other (s	/ner	
(Last) (First) (Middle) 100 CRYSTAL A DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 05/04/2011								X Officer (give title Offier (specify below) below) SVP Global Chief Mktg. Officer					
(Street) HERSHEY PA 17033 (City) (State) (Zip)					= 4. If -	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(5	•	(Zip)	n Doriv	rotive		ourit	ioo Ao	auirad	Die	nocod o	of or Be	noficia	Illy Owns					
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					action	ar) it	2A. Deemed Execution Date, f any Month/Day/Year)		3. Transa Code (3. Transaction Code (Instr.		4. Securities Acquired (A)		5. Amou Securiti Benefici Owned	int of es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			Instr. 4)		
Common Stock 05/0					/2011				М		9,507	A	\$35.8	37 52,92	52,924.4169		D		
Common Stock 05/04					/2011				S ⁽¹⁾		9,507	D	\$57.	3 43,44	0.4626 ⁽²⁾		D		
Common Stock															154.429 ⁽³⁾			401(k) Plan	
		Т	able II -								osed of converti			y 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/D	n Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exerciss Expiration Date (Month/Day/Yea		•	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership tt (Instr. 4)	
					Code	v	(A)		Date Exercisal		Expiration Date	Title	Amount or Number of Shares	1					
Non- qualified Stock Option	\$35.87	05/04/2011			M ⁽¹⁾			9,507	(4)	(02/12/2018	Common Stock	9,507	\$0	6,503		D		

Explanation of Responses:

Buy)

- $1. \ The exercise and sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on May 3, 2011.$
- 2. The total amount of securities reported as directly owned by the reporting person includes the acquisition of 23.0457 shares on March 15, 2011 pursuant to the Company's Dividend Reinvestment Plan.
- 3. The total amount of securities reported as indirectly owned by the reporting person includes 1.502 shares acquired from March 1, 2011 through April 30, 2011, pursuant to the Company's 401(k) Plan ("Plan"). The information is based on a report dated May 2, 2011, provided by the Plan trustee.
- 4. The options vest according to the following schedule: 25% vested on February 13, 2009, 25% vested February 13, 2010; 25% vested on February 13, 2011 and 25% will vest on February 13, 2012.

Michele G. Buck

05/05/2011

** 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.