Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFIC	CIAL OWNERSHIP

	OMB APPROVAL									
F	OMB Number:	3235-0287								
1	Estimated average bur	den								
Ш	houre per reenonee.	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]									neck all applio	cable) or	g Person(s) to Issue 10% Owr		ner
(Last) 100 CRY	(F STAL A D	•	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/14/2014									helow)		Other (specify below) orth America		респу
(Street) HERSHI			17033		4. 1	If Ame	endme	nt, Date	e of Original Filed (Month/Day/Year)					. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S		(Zip)	- Davis		- 6-		liaa Aa	ام میان در	Die		ef or Bo	noficial	ly Own and	<u> </u>			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		ed (A) or	5. Amou Securitie Benefici Owned I	nt of es ally Following	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock			02/1	14/2014				М		13,66	8 A	\$60.6	58 91	,105	D			
Common Stock			02/1	4/2014				S ⁽¹⁾		13,66	8 D	\$105	77,437		D			
Common Stock													161.0	6437 ⁽²⁾	I		101(k) Plan	
		-	Table II -	Deriva (e.g., ¡	ative puts,	Sec call	uritie ls, wa	es Acq arrants	uired, [s, optio	Disp	osed of, converti	or Ben ble secu	eficially irities)	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date, Transacti Code (Ins					6. Date Exercisa Expiration Date (Month/Day/Yea		of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ow For Dire or I (I) (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	e v	(A)) (D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares					
Non- qualified Stock Option (Right to	\$60.68	02/14/2014			M ⁽¹⁾			13,668	(3)		02/20/2022	Common Stock	13,668	\$0	41,007	,	D	

Explanation of Responses:

Buy)

- 1. The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on February 3, 2014.
- 2. The total amount of securities reported as indirectly owned by the reporting person represents a reduction of .2986 shares allocated to the reporting person's account in the Company's 401(k) Plan as of January 31, 2014. To manage liquidity needs of the 401(k) 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 October 30, 2013. The information is based on a report dated February 3, 2014, provided by the Plan trustee.
- 3. The options vest according to the following schedule: 25% vested on February 21, 2013, 25% will vest on February 21, 2014, 25% will vest on February 21, 2015 and 25% will vest on February 21, 2016.

Michele G. Buck

02/18/2014

** 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.