## SEC Form 4

## FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

<ul> <li>bilgations may continue. See Instruction 1(b).</li> <li>Filed pursuant to Section 16(a) of the Secur or Section 30(h) of the Investment C</li> </ul>												.934		hours	s per re	esponse:	0.5
1. Name and Address of Reporting Person* <u>Katzman James C</u>				2. Issuer Name and Ticker or Trading Symbol <u>HERSHEY CO</u> [ HSY ]							Relationsh heck all ap	plicable)	Reporting Person(s) to Issuer ble) 10% Owner				
(Last)	(Fi	First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/15/2023								er (give title w)		Other ( below)		
19 E. CHOCOLATE AVENUE				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) HERSHI	treet) IERSHEY PA 17033										X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	ate) (2	Zip)			Check th	his box to ind	icate tha	t a trar	saction Indi	ade pursu	ant to a (	contract, inst uction 10.	ruction or writ	ten pla	an that is inte	nded to
		Table	I - No	on-Deriva	ative	Secur	rities Acc	quirec	l, Dis	sposed of	, or Be	nefici	ally Owr	ned			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day			Execution Date		tion Date,	Date, Transaction Dispos Code (Instr.			ties Acquired (A) I Of (D) (Instr. 3, 4		d 5) Secur Benet Owne	icially d Following	Forr (D) (	wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) or (D)	Price	Trans	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 09/15/20					023			A		109.599	Α	\$239	.51 9,9	903.291		D	
		Ta	ble II ·							osed of, o convertib				d			
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		8. Price of Derivative Security (Instr. 5) Benefic Owned Followi (Instr. 4		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			

Explanation of Responses:

## <u>/s/ Kathleen S. Purcell, Agent</u> <u>for James C. Katzman</u> <u>09/</u>

Amount or Number

of Shares

Title

Expiration Date

Date Exercisable

09/15/2023

\*\* Signature of Reporting Person Date

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

 $\star$  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).

Code V

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.

(D)

(A)