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 BENEFICIAL

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

**OWNERSHIP** 

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>Buck Michele</u>					2. Issuer Name and Ticker or Trading Symbol HERSHEY CO [ HSY ]							(Ch	eck all appli	cable) or	g Person(s) to Issu 10% Own Other (sr		ner		
(Last) 100 CRY	(F 'STAL A D	•	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/02/2012									helow)	Officer (give title below)  SVP Chief G		Other (specify below)		
(Street) HERSHI	EY PA		17033		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Ye							Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(S		(Zip)		<u> </u>														
1. Title of Security (Instr. 3)		2. Trans	ransaction e nth/Day/Year)		2A. Deemed Execution Date,		Transaction Dispose Code (Instr. 5)		4. Securi	of, or Beneficia rities Acquired (A) or ed Of (D) (Instr. 3, 4 an		5. Amou Securitie Benefici Owned I	nt of es ally Following	Form: D	n: Direct c r Indirect E istr. 4) C	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			Instr. 4)		
Common Stock			04/0	2/2012				M		12,14	4 A	\$39.2	6 69	69,345		)			
Common	Stock			04/0	2/201	2			S <sup>(1)</sup>		12,14	4 D	\$62	57	,201	Γ	)		
Common Stock												156.6541 <sup>(2)</sup>		I		l01(k) Plan			
		-	Table II -									or Bend ble secu		Owned				,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date E (Month/Day/Year) if	Execution if any	Execution Date, f any		4. Transaction Code (Instr. 8)		n of		6. Date Exercisable Expiration Date (Month/Day/Year)		nd 7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		Ownershi Form: ly Direct (D) or Indirec (I) (Instr.	wnership orm: irect (D) r Indirect	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Non- qualified Stock Option (Right to	\$39.26	04/02/2012			M <sup>(1)</sup>			12,144	(3)	(	02/22/2020	Common Stock	12,144	\$0	24,288	3	D		

## **Explanation of Responses:**

- 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 November 3, 2011.
- 2. The total amount of securities reported as indirectly owned by the reporting person represents a reduction of .2659 shares allocated to the reporting person's account in the Company's 401(k) Plan as of March 5, 2012. To manage liquidity needs of the 401(k) Plan, the Plan trustee from time-to-time maintains a lower overall share balance (versus cash) in 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 February 23, 2012. The information is based on a report dated March 5, 2012, provided by the Plan trustee.
- 3. The options vest according to the following schedule: 25% vested on February 23, 2011, 25% vested on February 23, 2012, 25% will vest on February 23, 2013 and 25% will vest on February 23, 2014.

Michele G. Buck

04/03/2012

\*\* 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.