## 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

1. Name and Address of Reporting Person*  Wege D Michael							2. Issuer Name <b>and</b> Ticker or Trading Symbol HERSHEY CO [ HSY ]											of Reporting Per cable) or (give title		on(s) to Iss 10% Ov Other (s	/ner
(Last) (First) (Middle) 100 CRYSTAL A DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 02/01/2016											below)	-	, CAC	below)	респу
(Street) HERSHI (City)		A tate)	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)											G. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
		Tab	le I - No	n-Deriv	ative	Se	curit	ies Ac	cqu	ired,	Dis	posed c	of, o	r Bei	nefici	ially	Owned	l			
Date				Date	. Transaction ate Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)			ction nstr.	4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				l and Securition Benefici Owned I		es	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct   0	7. Nature of Indirect Beneficial Ownership
										Code	v	Amount		(A) or (D)	Pric	e	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)
Common	02/01	/2016	5				S <sup>(1)</sup>		100		D	\$	90	24	24,350		D				
Common Stock 02					/2016	5				M		1,000	) A \$5		\$54	4.68	25	25,350		D	
Common Stock 02/					/2016	5				S <sup>(1)</sup>		1,000	) D		\$	90	24	24,350		D	
Common Stock																	860.5	5996 <sup>(2)</sup>			401(k) Plan
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. Deemd Execution if any (Month/Da	Date,	Date, Transact Code (In					Date Expiration onth/Da	Date	Underly Derivat		ount of curities		S (I	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	e ercisabl		expiration vate	Title		Amount or Number of Shares	er					
Non- qualified Stock Option (Right to	\$54.68	02/01/2016			М			1,000		(3)	0	4/22/2017		nmon ock	1,00	0	\$0	6,550		D	

## **Explanation of Responses:**

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 23, 2015.
- 2. The total amount of securities reported as indirectly owned by the reporting person includes 3.6914 shares acquired from December 1, 2015 through December 31, 2015, pursuant to the Company's 401(k) Plan ("Plan"). The information is based on a report dated January 4, 2016, provided by the Plan Trustee.
- 3. The options vested according to the following schedule: 25% vested on April 23, 2008, 25% vested on April 23, 2009, 25% vested on April 23, 2010 and 25% vested on April 23, 2011.

/s/ D. Michael Wege

02/02/2016

\*\* 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.