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

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* <u>HERNQUIST THOMAS K</u>						2. Issuer Name and Ticker or Trading Symbol HERSHEY CO [HSY]									ck all applic	or		10% Ow	ner
(Last) 100 CRY	Last) (First) (Middle) 00 CRYSTAL A DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 02/16/2006									X	below)	er (give title v) , Global Chief		Other (specify below) Growth Off.	
(Street) HERSHEY PA 17033					- 4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable 2) X Form filed by One Reporting Person Form filed by More than One Reporting Person				1
(City)	ty) (State) (Zip)																		
			le I - Noi							, Dis					1			1.	
Dai				Date			2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amoun Securities Beneficia Owned Fo	s lly ollowing	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) o (D)	r Pr	ice	Reported Transacti (Instr. 3 a	ion(s)		[Instr. 4)
Common Stock 02/16					6/200	2006		A		18,25	0 A	A \$0		24,661.4933(1)			D		
Common Stock														467.05				401(k) Plan	
		-	Table II -								osed of, converti				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,	4. Transa Code (1 8)		of		6. Date E Expiration (Month/E	n Dat	of Securitie		ties 1g e Secu		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Nun of Sha						
Non- Qualified Stock Option (right to	\$52.3	02/16/2006			A		24,300		(2)		02/15/2016	Common Stock	24,	300	\$0	24,300	0	D	

Explanation of Responses:

- 1. The total amount of securities reported as directly owned by the reporting person in Column 5 of Table I includes 21.5280 shares acquired on June 15, 2005; 26.8001 shares acquired on September 15, 2005; and 27.0527 shares acquired on December 15, 2005 pursuant to the Company's Dividend Reinvestment Plan.
- 2. Options vest according to the following schedule: 25% vest on the first anniversary of the grant date, an additional 25% vest on the second anniversary of the grant date, an additional 25% vest on the third anniversary of the grant date, and the options become fully vested on the fourth anniversary of the grant date.

Remarks:

The total amount of securities reported as indirectly owned by the reporting person in Column 5 of Table I (401(k) Plan) includes 32.9300 shares acquired from June 1, 2005 through December 31, 2005, and 28.6300 shares acquired from January 1, 2006 through January 31, 2006, pursuant to the Company's Employee Savings Stock Investment and Ownership Plan (ESSIOP). These shares were acquired at various intervals. The closing price on December 30, 2005, the last trading day of the 2005 fiscal year, was \$55.25; and on January 31, 2006, was \$51.20. The exact price of each share at the date of acquisition is not readily determinable

> 02/21/2006 Thomas K Hernquist

** 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.