FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

wasnington,	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

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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>Turner Leslie M</u>						2. Issuer Name and Ticker or Trading Symbol HERSHEY CO [HSY]									Check all D	applicable) irector		Person(s) to Issuer 10% Owner	
(Last) (First) (Middle) 100 CRYSTAL A DRIVE					3. Date of Earliest Transaction (Month/Day/ 07/09/2015					Day/Year)	ar)				fficer (give title elow) SVP, GC a	I	Other (specify below) d Secretary		
(Street) HERSHE			17033 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							ine) X F F						
		Tabl	e I - Noi	n-Deriv	ative	Se	curiti	es Ac	quired,	Dis	posed o	of, or	r Ben	efici	ally Ow	ned			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			nd Se Be Ow	Amount of curities neficially ned Following ported	Form: Dir (D) or Ind	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount		(A) or (D)	Price	Tra	nsaction(s) str. 3 and 4)			(msu. 4)	
Common	Stock			07/09	9/2015	5			F		441		D	\$90	.81	32,320	2,320 D		
		Та									sed of, onvertib				y Own	ed			
Derivative Conversion Date Exe Security or Exercise (Month/Day/Year) if ar		3A. Deem Execution if any (Month/Da	n Date, Transac Code (Ir					Expiratio	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price Derivativ Security (Instr. 5)		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	of	ares							

Explanation of Responses:

/s/ Kathleen S. Purcell, Agent for Leslie M. Turner

07/10/2015

** 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.