Edgar Filing: HERSHEY CO - Form 4

HERSHEY C	O										
Form 4											
July 05, 2017											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO						OWNESION					
-	UNITE	DSIAIE			D.C. 2054		GE U	OMINII55ION	OMB Number:	3235-0287	
Check this	s box		vv az	, inington,	D.C. 203-	1/				January 31,	
if no longer STATEMENT OF CHAN				GES IN BENEFICIAL OWNER				NERSHIP OF	Expires:	2005	
subject to STATEMENT OF CHAIN Section 16.				SECURITIES					Estimated average burden hours per		
	Form 4 or									0.5	
Form 5 obligation	^						•	e Act of 1934,			
may conti		• •		•	U 1	•		1935 or Section	n		
See Instru	ction	30(h)) of the In	vestment	Company	Act	of 194	0			
1(b).											
(Print or Type R	esponses)										
				Name and					ip of Reporting Person(s) to		
Mead James M Symbol							Issuer				
			HERSH	SHEY CO [HSY]				(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction						
100 CDVCT				nth/Day/Year)			X_ Director 10% Owner Officer (give title Other (specify				
100 CRYSTAL A DRIVE 07/01/			07/01/2	1/2017				below)	below)		
	(Street)		4. If Ame	endment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mor	nth/Day/Year)			Applicable Line)			
	D.4. 15022							_X_ Form filed by C Form filed by M	One Reporting Per Iore than One Re		
HERSHEY,	PA 17033							Person		portung	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative Se	curiti	es Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction D	Date 2A. Dee	med	3.	4. Securitie	es Acq	uired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year) Execution Date, if any (Month/Day/Year)			if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities	Form: Direct	Indirect	
(Instr. 3)								2		Beneficial Ownership	
		(Ivionui/	Day/Teal)	(111501.0)				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
C				Code V	Amount	(D)	Price	(mout o and +)			
Common Stock	07/01/2017			А	349.748	А	\$0	11,422.227	D <u>(1)</u>		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactio	5. orNumber	6. Date Exer Expiration D		7. Title and Amount of	8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		/Year)	Underlying Securities (Instr. 3 and	Security (Instr. 5) 4)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D) Date Exercisable	Expiration Date	Title Amou or Numb of Share	ber	

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Mead James M 100 CRYSTAL A DRIVE HERSHEY, PA 17033	Х						
Signatures							
/s/ James Turoff, Agent for Jan Mead	nes M.	07/	/05/2017				
**			_				

<u>**</u>Signature of Reporting Person

Date

Explanation of Responses:

* 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).

The total amount of securities reported as directly owned in Column 5 includes 55.501 shares acquired on June 15, 2017, pursuant to a
 (1) dividend reinvestment feature of the Company's Directors' Compensation Plan, the provisions of which are substantially similar to the dividend reinvestment features of the broad-based dividend reinvestment plan available generally to Company stockholders.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.