Edgar Filing: HERSHEY CO - Form 4

HERSHEY O	20											
Form 4												
April 04, 201	17											
FORM	4							~ ~ ~		OMB AF	PROVAL	
	UNIII	ED STATES		RITIES A shington				GE C	OMMISSION	OMB Number:	3235-0287	
Check thi if no long	ter.									Expires:	January 31, 2005	
subject to STATEMENT OF CHANGES IN BENEFICIAL OWNE					NERSHIP OF	Estimated a						
Section 1				SECUI	RI'	FIES				burden hou	rs per	
Form 4 or Form 5			Castion 1	(a) af 4	.	C	. En	- 1	A at af 1024	response	0.5	
obligation		▲						•	e Act of 1934, 1935 or Section	n		
may cont	inue.		of the In	•		• •	•			1		
See Instru 1(b).	iction	50(II)	or the m	vestmen	ιc	ompany	1101 0	51 1 7 4	0			
1(0).												
(Print or Type R	Responses)											
1. Name and Address of Reporting Person * 2. Issuer Name Nevels James E Symbol				r Name an	d T	icker or T	rading		5. Relationship of Issuer	Reporting Pers	son(s) to	
									155001			
HERSH			HEY CO [HSY]					(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	f Earliest T	Tran	isaction						
			h/Day/Year)					X_ Director Officer (give	Owner er (specify			
100 CRYSI	AL A DRIVE	<u>-</u>	04/01/2	017					below)	below)	a (specify	
	(Street)		4. If Ame	ndment, D)ate	Original			6. Individual or Jo	int/Group Filin	g(Check	
			Filed(Mor	nth/Day/Yea	ar)	-			Applicable Line)	-	-	
									_X_Form filed by C	One Reporting Pe Iore than One Re		
HERSHEY,	PA 17033								Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-	Der	rivative Se	ecuriti	es Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction	Date 2A. Dee	med	3.	4	4. Securitie	es Acq	uired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye	<i>.</i>	on Date, if	Transact Code		A) or Disp			Securities	Form: Direct		
(Instr. 3)		any (Month/Day/Year)				Instr. 3, 4	and 5)	1	2		Beneficial Ownership	
		(Wond)	Day/Tear)	(Instr. 8)					Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported			
							or		Transaction(s) (Instr. 3 and 4)			
~				Code V	7	Amount	(D)	Price	(msu. 5 and 4)			
Common Stock	04/01/2017			А	1	120.703	А	\$0	8,080.443	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 Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,		(Month/Day/Year) ative ities ired r osed) . 3,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	4, and 5	D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships									
reporting o where reality read too	Director	10% Owner	Officer	Other						
Nevels James E 100 CRYSTAL A DRIVE HERSHEY, PA 17033	Х									
Signatures										
/s/ Kathleen S. Purcell, Agent f Nevels	E.	04/0	3/2017							
<u>**</u> Signature of Reporting Pe		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 7.943 shares acquired on March 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.