## Edgar Filing: WALLING KEVIN R - Form 4

WALLING VEVINID

Form 4													
March 22, 20 FORM Check this if no long subject to Section 10	<b>4</b> UNITED										OMB APPROVAL OMB 3235-0287 Number: January 31, Expires: January 31, 2005 Estimated average burden hours per		
Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed p s Section 1	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								response 0			
(Print or Type R	esponses)												
WALLING KEVIN R Sym			Symbol	2. Issuer Name <b>and</b> Ticker or Trading ymbol IERSHEY CO [HSY]					5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle) 3. Da (Mon			(Month/D	Date of Earliest Transaction onth/Day/Year) /20/2019					(Check all applicable) <u></u> Director 10% Owner <u></u> Officer (give title Other (specify below) below) SVP Chief HR Officer				
				endment, Date Original onth/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person				
HERSHEY,	PA 17033								Form filed by M Person	fore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Noi	n-De	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	med n Date, if Day/Year)	Code (Instr.	8)	4. Securit n(A) or Di (Instr. 3, Amount	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	03/20/2019			F		243	D	\$ 109.8	42,957	D			

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / A	Address	Relationships							
<b>1 0</b>	Director	10% Owner	Officer	Other					
WALLING KEVIN R 19 E. CHOCOLATE AV HERSHEY, PA 17033	ENUE		SVP Chief HR Officer						
Signatures									
/s/Kevin R. Walling	03/22/2019								
**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).

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.