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Form 990

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)

Open to Public

OMB No 1545-0047

Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. A For the 2009 calendar year, or tax year beginning 08/01, 2009, and ending **20** 09 12/31,C Name of organization THE M.S. HERSHEY FOUNDATION D Employer identification number Please 23-6242734 Doing Business As pnnt or Number and street (or P O box if mail is not delivered to street address) Boom/suite E Telephone number Name change type 63 WEST CHOCOLATE AVENUE (717) 298-2200 Initial return See City or town, state or country, and ZIP + 4 Instruc-Amended HERSHEY, PA 17033 5,113,847. bons G Gross receipts \$ return Application pending F Name and address of principal officer MR. RAYMOND GOVER H(a) Is this a group return for Yes Χ 63 W CHOCOLATE AVENUE HERSHEY, PA 17033 H(b) Are all affiliates included X | 501(c) (3) ◀ (insert no) 4947(a)(1) or If "No." attach a list (see instructions) Website: ▶ WWW.MSHERSHEYFOUNDATION.ORG H(c) Group exemption number Corporation X Trust L Year of formation 1935 M State of legal domicile PA Form of organization Summary Part I Briefly describe the organization's mission or most significant activities TO PRESERVE AND ENHANCE MILTON HERSHEY'S LEGACY AND COMMUNITY VISION AND TO PROVIDE EDUCATIONAL AND CULTURAL ENRICHMENT TO THE RESIDENTS OF THE HERSHEY AREA. If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 0 Number of independent voting members of the governing body (Part VI, line 1b) 4 147 Total number of employees (Part V, line 2a) 5 420 Total number of volunteers (estimate if necessary) 6 0 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 34. **Prior Year Current Year** viii, in名in(C 6,727,287 1,603,659. Contributions and grants (Par Program service revenue (Part VIII rine 2g) 5,634,437 2,672,057. 9 ğ Investment income (Part VIII, column (A), lines 304, and (7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and -21,112 673,269 10 3,040 0. 11 Total revenue - add lines 8 through 11 (must equal-Part-Vill-column (A), line 12) 12,343,652 4,948,985. 12 Grants and similar amounts paid (Part) (Golumn (A), lines 11-3) 0. 13 Benefits paid to or for members (Part IX, column (A), line 4) Ω Ω 3,353,667 1,584,550. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses, Part IX, column (D), line 25) 3,389,239. 6,799,653 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 10,153,320 4,973,789. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 2,190,332 -24.804Revenue less expenses Subtract line 18 from line 12. Beginning of Year **End of Year** 55,641,035 56,597,783. Total assets (Part X, line 16) 21,335,877 20,695,929 Total liabilities (Part X, line 26) 34,305,158 35,901,854. 22 Net assets or fund balances Subtract line 21 from line 20. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is Aue, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge CHÁL Sign Signature of officer Here EXECUTIVE Type or print name and title

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.*

THORNTON

address, and ZIP + 4 2001 MARKET STREET, SUITE 3100 PHILADELPHIA, PA 19103

May the IRS discuss this return with the preparer shown above? (see instructions)

GRANT

Form 990 (2009)

Preparer's identifying number

(see instructions) 323/1

36-6055558

215-561-4200

Yes

Check if

employed

Phone no

11/12/2010

Paid

Preparer's

Preparer's

signature

Firm's name (or yours

4e Total program service expenses ▶

4,558,630.

Part	IV . Checklist of Required Schedules			
			Yes	No .
1 '	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		Х
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	Χ	
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If" Yes," complete Schedule D, Part V	10	Χ	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Χ	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		ş.	
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 167 If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI, XII, and XIII	12	Х	
12A	Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

Part	V. Checklist of Required Schedules (continued)			
			Yes	No
21 `	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
·	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	274		
2 J a	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
.	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	23a		
b				
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	0.5 %		X
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			Х
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			.,
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			١,,
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b	ļ	Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part N	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
-	Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u> </u>
57	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		х
20		3/		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	20	X	
	197 Note. All Form 990 filers are required to complete Schedule O	38	_ ^	Ь

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of I			1
	US Information Returns Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			,
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			,
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 147			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see		i	
	instructions)			į
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			اا
	this return?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			.,
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country ▶		i	
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
	and Financial Accounts			v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	E		
6.2	Prohibited Tax Shelter Transaction?	5c		
Va	organization solicit any contributions that were not tax deductible?	6a	i	Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or	ba		
-	gifts were not tax deductible?	6ь	İ	
7	Organizations that may receive deductible contributions under section 170(c).	00		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		.	
	and services provided to the payor?	7a		_ X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			l
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal		ا ۔ ا	
	benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	, , , , , , , , , , , , , , , , , , , ,	7g_	ļ	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
_	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	11 · 12		
	Initiation fees and capital contributions included on Part VIII, line 12	ين سور		Ì
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	٦,	_	
11	Section 501(c)(12) organizations. Enter.	;;; ;;;	7	-
	Gross income from members or shareholders		ist.	,
D	Gross income from other sources (Do not net amounts due or paid to other sources against		2	7
120	amounts due or received from them)	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	2a		
		老孩子		

Part VI. Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	ion A. Governing Body and Management		Yes	No
	Enter the number of voting members of the governing body			 ''
	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	_	Х	1
	any other officer, director, trustee, or key employee?	2_		╀
3	Did the organization delegate control over management duties customarily performed by or under the direct	:		1
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X	╙
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
, u	of the governing body?	7a		Ιx
		7b		ĺχ
	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7.0		+-
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following		v	
а	The governing body?	8a	X	-
b	Each committee with authority to act on behalf of the governing body?	8b_	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		×
	ion B. Policies (This Section B requests information about policies not required by the Internal enue Code.)			
IUVE	inde Gode./		Yes	1
Πa	Does the organization have local chapters, branches, or affiliates?	10a		X
	-	100		t
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	406		1
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		╁╌
1	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		v	
	form?	11	X	╀
1A	Describe in Schedule O the process, if any, used by the organization to review this Form 990	<u> </u>		_
2a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	↓_
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
_	and the right in the pency in the series of			
	describe in Schedule O how this is done	12c	X	1
2	describe in Schedule O how this is done	12c		+
3	Does the organization have a written whistleblower policy?	13	Х	
4	Does the organization have a written whistleblower policy?	$\overline{}$		
	Does the organization have a written whistleblower policy?	13	Х	
4	Does the organization have a written whistleblower policy?	13	X	
4	Does the organization have a written whistleblower policy?	13	X X	
4 5	Does the organization have a written whistleblower policy?	13	X	
4 5 a	Does the organization have a written whistleblower policy?	13 14 15a	X X	
4 5 a b	Does the organization have a written whistleblower policy?	13 14 15a	X X	
4 5 a	Does the organization have a written whistleblower policy?	13 14 15a 15b	X X	X
4 5 a b	Does the organization have a written whistleblower policy?	13 14 15a	X X	X
4 5 a b	Does the organization have a written whistleblower policy?	13 14 15a 15b	X X	X
4 5 a b	Does the organization have a written whistleblower policy?	13 14 15a 15b	X X	X
4 5 a b 6a b	Does the organization have a written whistleblower policy?	13 14 15a 15b	X X	X
4 5 a b 6a b	Does the organization have a written whistleblower policy?	13 14 15a 15b	X X	X
4 5 a b 6a b	Does the organization have a written whistleblower policy?	13 14 15a 15b	XXXX	X
4 5 6 6 6 b 6 6 6 7	Does the organization have a written whistleblower policy?	13 14 15a 15b	XXXX	X
a b 6a b	Does the organization have a written whistleblower policy?	13 14 15a 15b	XXXX	X
6a b	Does the organization have a written whistleblower policy?	13 14 15a 15b 16a	XXXX	x
4 5 a b 6a b	Does the organization have a written whistleblower policy?	13 14 15a 15b 16a	XXXX	x
4 5 a b 6a b	Does the organization have a written whistleblower policy?	13 14 15a 15b 16a 16b	XXXX	X
4 5 a b 6a b	Does the organization have a written whistleblower policy?	13 14 15a 15b 16a 16b	XXXX	X
6a b	Does the organization have a written whistleblower policy?	13 14 15a 15b 16a 16b rest	XXXX	

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

لـــا	Check this box if the organization	ı dıd no	t compensate any curren	t officer, director, or trustee
-------	------------------------------------	----------	-------------------------	---------------------------------

(A)	(B)			•	C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee Por director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
RAYMOND L GOVER					ŀ					
BD OF MGRS-PRESIDENT/CHAIRMAN	1.00	Х		Х				0.	127,500	0
JAMES M MEAD										
BOARD OF MANAGERS	1.00	Х						0.	128,539	0
VELMA A REDMOND ESQ	<u>[</u>				ļ	;				
BOARD OF MANAGERS	1.00	Х						0.	138,546	0.
ROBERT REESE]									
BOARD OF MANAGERS	3.00	Х			_			0.	1,235,294.	270,348
LEROY S ZIMMERMAN	1									
BOARD OF MANAGERS	1.00	Х						0.	291,750.	215,597
HERSHEY TRUST COMPANY]									
INSTITUTIONAL TRUSTEE	4.00		Х			!		1,000.	0 ;	0
GAYLA M BUSH]									
ASST TREAS/ASST SEC(7/15-CURR)	2.00			Х		l i		0.	247,277	47,224
KENNETH GALL]									
ASST TREAS/ASST SEC(1/1-7/14)	1.00			Х				0.	124,154	36,821
MARY LOUISE PORTER ESQ	<u> </u>							•		
SECRETARY (8/11-CURRENT)	5.00			Х				0.	422,578	25,201
VINCENT B RUDISILL										
TREASURER	2.00			X				0.	1,042,319	46,004
JAMES M SHEEHAN ESQ										
SECRETARY (1/1-8/10)	3.00			Х				0.	342,397	61,872
MARTA HOWELL										
EXECUTIVE DIRECTOR (1/1-9/21)	40.00			X				129,249.	0.	13,061
DONALD PAPSON										
EXECUTIVE DIRECTOR (9/22-CURR)	40.00		L	Х				35,226.	32,367	11,739
ANTHONY J COLISTRA ED D										
FORMER-BOARD OF MANAGERS	0.00						Х	0.	245,032	41,778
ROBERT C VOWLER										
FORMER OFFICER	0.00						Х	0.	2,844,427	35,417
]									

Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	plo	ye	es,	and F	ligi	hest Compensat	ed Emplo	yees, (co	ontinue	<u>d)</u>	-9
(A) Name and title	(B) Average			chec		that app		(D) Reportable	(E) Report	able	Est	(F) imated	
•	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compens from rei organiza (W-2/1099	lated itions	comp fro orga and	ount of other eensation the inization related	on on d
		-				ä							
		_											
1b Total		· · · ·				<u> </u>	▶	165,475	7,222	2,180.		305,0	062
2 Total number of individuals (including but no reportable compensation from the organization)		hose :	liste L	d a	bov	e) who	o re	eceived more than	\$100,000	ın			
3 Did the organization list any former off	car direct	or or	tri	ieto	۵	kov c	mn	olovee or highes	t company	hatea		Yes	No
employee on line 1a? If "Yes," complete Schee	dule J for su	ch ınd	lıvıdı	ual			• •				3	X	
4 For any individual listed on line 1a, is the organization and related organizations	greater th	nan \$	150	,00	00?	If "Y	'es,'	" complete Sched	ule J for	such			
individual	e or accr	ue c	omp	ens	satio	on fro	om	any unrelated of	rganizatior	n for	4	Х 	
services rendered to the organization? If "Yes	" complete	Schea	lule .	J fo	r su	ch pe	rsor	<u></u>	<u></u>	· · · ·	5		Х
Complete this table for your five highest compensation from the organization	compensa	ted in	ndep	eno	den	cont	trac	tors that received	d more th	an \$10	0,000	of	
(A) Name and business ad	dress							(B) Description of se	rvices	С	(C)		
							-			 	· · · · · · · · · · · · · · · · · · ·		
					_		\downarrow						
							\pm						
2 Total number of independent contractors (more than \$100,000 in compensation from t				nite	d to	thos 0	se I	isted above) who	received				

Par	t VIII	Statement of Revenue			23-6242734		
				(A) Total revenue	(B) Related or -'. exempt function revenue	r (C) r Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts a	1 a	Federated campaigns 1a					1
E a	b	Membership dues 1b	59,808				ì
s, g	С	Fundraising events 1c	90				,
lar a	d	Related organizations 1d	132,903				'
ns,	е	Government grants (contributions) 1e	1,410,858				į
er s	f	All other contributions, gifts, grants,		-			1
ë		and similar amounts not included above . 11					
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		1,603,659			
Service Revenue			Business Code				
ě	2a	ADMISSIONS	713990	2,279,357	2,279,357		
8	b	EDUCATION SERVICES	611710	17,600	17,600		
Š	С	SALE OF MUSEUM COLLECTIONS	900099	44,005	44,005		
Š	d	PROGRAM REVENUE FROM HE&R AGREEMENTS	900099	90,214	90,214		
Program	е	OTHER INCOME	900099	240,881	240,881		
õ	f	All other program service revenue Total. Add lines 2a-2f		2,672,057			
	g			2,072,037			
	3	Investment income (including dividends, into other similar amounts)		312,030			312,030
	4	Income from investment of tax-exempt bone	_	0			333,333
	5			0			
		(i) Real	(II) Personal				
	6a	Gross Rents					
	b	Less rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)		0			
	7a	Gross amount from sales of (i) Securities	(II) Other				
		assets other than inventory 532,84	9 -6,748				
	b	Less cost or other basis	İ				ţ
		and sales expenses 164,86					
	c	Gain or (loss)				- -	
	ď	Net gain or (loss)	· · · · · · · · · · · · · · · · · · ·	361,239			361,239
Jue	8a	Gross income from fundraising					į t
vel		events (not including \$					(
Re		of contributions reported on line 1c) See Part IV, line 18					· '
er	b	Less direct expenses					
Other Revenue	c	Net income or (loss) from fundraising events					
•	9a	Gross income from gaming activities					
		See Part IV, line 19	а				i
	ь	Less direct expenses				·· —	
	С	Net income or (loss) from gaming activities	<u></u>	0			
	10a	Gross sales of inventory, less	-				
		returns and allowances			•		-
	b	Less cost of goods sold		·			
	<u>c</u>	Net income or (loss) from sales of inventory. Miscellaneous Revenue	Business Code	0			1
							
	11a		-				
	b		-				
	°	All other revenue					
	d	All other revenue		0			-
	12	Total Revenue. See instructions			2,672,057	0	673,269
	·					·	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 2.1	0.			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3	Grants and other assistance to governments, organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors, trustees, and key employees	35,000.		35,000.	· · · · · · · · · · · · · · · · · · ·
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	1,157,744.	985,962.	171,782.	·
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	127,692.	113,925.	13,767.	
9	Other employee benefits	138,159.	113,243.	24,916.	
10	Payroll taxes	125,955.	110,704.	15,251.	
11	Fees for services (non-employees)				
а	Management	86,682.	65,430.	21,252.	
b	Legal	9,654.		9,654.	
	Accounting	0.			
	Lobbying	0.			
	Professional fundraising services See Part IV, line 17	0.			
	Investment management fees	0.			
	Other	226,241.	224,632.	1,609.	
12	Advertising and promotion	17,221.	15, 152.	2,043.	
13	Office expenses	37,240.	28,733.	8,507.	
14 15	Information technology	0.		- 0,507.	
16	Royalties	305,218.	263,323.	41,895.	
17	Travel	323.	310.	13.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	760.	667.	93.	
20	Interest	531,863.	531,863.		
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	867,480.	859,062.	8,418.	
23	Insurance	55,853.	51,177.	4,676.	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	COST OF ATTRACTIONS	989,399.	989,399.		······································
-	PROGRAM SUPPLIES	118,875.	68,548.	50,327.	
-	COLLECTIONS MANAGEMENT	63,667.	63,667.	_	
_	EQUIPMENT	9,976.	8,203.	1,773.	
е	DUES AND SUBSCRIPTIONS	6,233.	5,343.	890.	
f	All other expenses	62,554.	59,287.	3,267.	
	Total functional expenses. Add lines 1 through 24f	4,973,789.	4,558,630.	415,133.	
	Joint Costs. Check here ► If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
JSA 52 1		V 09-8.5	2334	1545	Form 990 (2

	rt X			,	1
		بي. د م	(A) Beginning of year		نهي۔ (B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	2,624,036.	2	2,826,688.
	3	Pledges and grants receivable, net	879,413.	3	735,000.
	4	Accounts receivable, net	2,138,418.	4	1,737,049.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges	159,690.	9	146,934.
	-	Land, buildings, and equipment cost or 10a 32,501,408.			
		other basis Complete Part VI of Schedule D			
	Ь	Less accumulated depreciation	26,681,644.	100	25,978,383.
	11	Investments - publicly traded securities	23,157,834.		25,173,729.
	12	Investments - other securities See Part IV, line 11	20,101,001	12	20,110,1251
	13	Investments - program-related See Part IV, line 11		13	
	14	F		14	
	15	Intangible assets	···-	15	
		Other assets See Part IV, line 11	55,641,035.	16	56,597,783.
	16 17	Total assets. Add lines 1 through 15 (must equal line 34)	2,337,070.	17	773,224.
		Accounts payable and accrued expenses	2,331,010.		773,224.
	18	Grants payable	1,481,783.	18	1,419,429.
	19	Deferred revenue	1,401,703.	19	1,419,429.
	20	Tax-exempt bond liabilities		20	
Liabilities	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Ę	22	Payables to current and former officers, directors, trustees, key			
ia;		employees, highest compensated employees, and disqualified			
_		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	13 517 004	24	10 502 076
	25	Other liabilities Complete Part X of Schedule D	17,517,024.	25	18,503,276.
	26	Total liabilities. Add lines 17 through 25	21,335,877.	26	20,695,929.
Fund Balances		Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34.			
a <u>n</u>	27	Unrestricted net assets	14,090,970.		13,952,111.
Bal	28	Temporarily restricted net assets	20,214,188.	28	21,949,743.
힏	29	Permanently restricted net assets		29	
or Fu		Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.			
ts (30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	34,305,158.	33	35,901,854.
~	34	Total liabilities and net assets/fund balances	55,641,035.	34	56,597,783.
	 0 7	Total national and the additional balances		04	

Form **990** (2009)

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form **990** (2009)

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Χ

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

THE I	M.S	. HERSH	EY FOUNDATI	ION						23-62	42734
Part I		Reason fo	or Public Chari	ity Status (All organ	izations m	ust comp	lete this	part.) Se	e instruc	ctions.	
The or	ganı	ization is no	t a private found	dation because it is. (F	or lines 1 t	through 11,	check on	ly one bo	x.)		
1	_] /	A church, co	onvention of chu	rches, or association of	of churches	described	ın sectio	n 170(b)(1)(A)(i).		
2] /	A school de	scribed in <mark>sectio</mark>	on 170(b)(1)(A)(ii). (Att	ach Sched	ule E.)					
3	_ /	A hospital o	r a cooperative l	hospital service organ	ızatıon desc	cribed in se	ction 170	(b)(1)(A)	(iii).		
4		A medical i	research organiz	zation operated in co	njunction v	with a hos	pital des	cribed in	section	170(b)(1)	(A)(iii). Enter the
_	_ t	nospital's na	ame, city, and sta	ate							
5	/	An organiza	ation operated fo	or the benefit of a col	lege or un	iversity ow	ned or o	perated t	y a gove	ernmental	unit described in
	_	section 170	(b)(1)(A)(iv). (C	omplete Part II.)							
6	_		_	vernment or governme							
7	_			Ily receives a substan		its support	t from a q	governme	ental unit	or from t	he general public
_	_			(1)(A)(vi). (Complete F							
8	_			d in section 170(b)(1) (
9 X		-		Ily receives. (1) more							
				ited to its exempt fun		-					
		• •	_	ment income and un				•		511 tax)	from businesses
_	_			n after June 30, 1975.					-		
10	⊣ .	-	-	and operated exclusive	•	•	-				
11 _				and operated exclusi							
				ublicly supported orga							
				at describes the type o		_					
	_	aTyp	<u> </u>	Type II c		e III - Fund	-	-			rpe III - Other
e [_			-	ertify that the organiz				-			•
			section 509(a)(ion managers and oth	er man on	e or more	publicly :	supported	organiza	ations de	scribed in section
f				.e.) d a written determina	tion from t	the IDS the	at it ic o	Tuno I I	waa II o	r Tupo III	oupporting.
•		_	n, check this box		tion nom	ine ino ina	ai ii is a	Type I, I	ype II, O	i type iii	supporting
g		-		the organization acce		ift or contri	bution fro	 m any of	 the		
9		following pe		the organization door	pica any g	int or contin	bation ire	in any or	1110		
		•		or indirectly controls	either ale	one or tog	ether wit	h person	s describ	ned in (ii)	Yes No
	,		-	erning body of the sup		_	011107 7711	poloc.	0 0000111	300 III (II)	11g(ı)
	(-	person described in (i) a	•						11g(n)
				of a person described		above?					11g(m)
h			-	ation about the suppo		•					
(i) Na		of supported	(II) EIN	(III) Type of organization	(iv) Is the d	organization	(v) Did y	ou notify	(vi)	s the	(vii) Amount of
0	rgan	ization		(described on lines 1-9 above or IRC section		sted in your document?		nization in of your		tion in col	support
				(see instructions))	governing	document		or your	U.	zed in the S?	
					Yes	No	Yes	No	Yes	No	
			_								
										<u> </u>	·
											·
_											
Total					i						

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Par	(Complete only if you check	ganizations D ked the box or	escribed in S	Sections 170(8 of Part I.)	b)(1)(A)(iv) a	nd 170(b)(1)(A	A)(vi)
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each						
	person (other than a governmental unit or				<u></u>	- (
	publicly supported organization) included					4,	
	on line 1 that exceeds 2% of the amount					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
_	shown on line 11, column (f)					7.3	
6	Public support. Subtract line 5 from line 4.		<u> </u>	<u> </u>		r'e i	
	tion B. Total Support	(=) 000 <i>r</i>	(*) 0000	(-) 0007	(4) 0000	(-) 0000 I	//\ T-\-!
_	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			-			
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10			1		Ž.	
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First five years. If the Form 990 is f organization, check this box and stop here			nd, third, fourth,	or fifth tax ye	ar as a section	501(c)(3) ▶
Sec	tion C. Computation of Public Sup	•				T T	
14	Public support percentage for 2009 (In						<u>%</u>
15	Public support percentage from 2008						%_
16a	331/3% support test - 2009. If the o						
	this box and stop here. The organizati			_			
b	331/3% support test - 2008. If the	-					
	check this box and stop here. The org	•					
17a	10%-facts-and-circumstances test - 2	-					
	or more, and if the organization m					-	•
	Part IV how the organization meets			-	•	, ,	
	organization						
b	10%-facts-and-circumstances test -		_		•		
	15 is 10% or more, and if the org						-
	Explain in Part IV how the organization				•	•	publicly
	supported organization						▶ 🔲
18	Private foundation. If the organization						
	instructions	<u> </u>	<u> </u>	<u> </u>			
					9	Schedule A (Form 9	90 or 990-EZ) 2009

Part III .	Support Schedule for Organizations Described in Section 509(a)(2)
	(Complete only if you checked the box on line 9 of Part I.)

Ca	llendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include						
	any "unusual grants.")	572,370	484,284	485,587.	6,730,327	1,603,659	9,876,22
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	4,403,049	4,806,019	5,637,596	5,634,437	2,672,057.	23,153,15
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit to the						
	organization without charge						
c		4,975,419	5 200 202	6 122 102	12 264 764	4 275 716	22 020 20
6	Total. Add lines 1 through 5	4,975,419	5,290,303	6,123,183	12,364,764	4,275,716	33,029,38
/a	Amounts included on lines 1, 2, and 3		176 555	2 2 2 2 2 2 2	1 016 00		2.001.01
b	received from disqualified persons Amounts included on lines 2 and 3	136,636	176,880	2,143,794	1,216,036	132,903	3,806,24
_	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13						
	for the year						
С	Add lines 7a and 7b	136,636	176,880	2,143,794	1,216,036	132,903	3,806,24
8	Public support (Subtract line 7c from						
	line 6)						29,223,13
ec	tion B. Total Support	·		· · · · · · · · · · · · · · · · · · ·			
Ca	ılendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	4,975,419	5,290,303	6,123,183	12,364,764	4,275,716	33,029,38
0 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar					•	
	sources	773,281	876,320	813,389	720,883	312,030	3,495,90
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975	1					
c	Add lines 10a and 10b	773,281	876,320	813,389	720,883	312,030	3,495,90
1	Net income from unrelated business						.,,
•	activities not included in line 10b,		-				
	whether or not the business is regularly						
	carried on						
2	Other income Do not include gain or						
	loss from the sale of capital assets						
_	(Explain in Part IV)						
3	Total support. (Add lines 9, 10c, 11,						
	and 12)	5,748,700	6,166,623	6,936,572	13,085,647	· · · · · · · · · · · · · · · · · · ·	36,525,28
4	First five years. If the Form 990 is for	the organization	's first, second,	third, fourth, or	fifth tax year a	s a section 501(c)(3)
	organization, check this box and stop here.	· · · <u>· · · · · · · · · · · · · · · · </u>		. <u> </u>		<u> </u>	▶
ec	tion C. Computation of Public Sup						
5	Public support percentage for 2009 (line 8,	column (f) divide	d by line 13, colun	nn (f))		15	80.01%
6	Public support percentage from 2008 Sche	dule A, Part III, line	e 15	<i></i>	<u>.</u> . ,	16	79.39%
ec	tion D. Computation of Investmer	nt Income Perc	entage				
7	Investment income percentage for 2009 (lin			3, column (f))		17	9.57%
8	Investment income percentage from 2008					18	10.59%
	33 1/3% support tests - 2009. If the or					L	
- 4	17 is not more than 33 1/3% check th	-					. (-
h	33 1/3% support tests - 2008. If the orga	•	_	·		•	
	.,						
D					ac ac a nublicly	supported organiz	zation ▶ I
:0	Ine 18 is not more than 331/3%, check Private foundation. If the organization		•				

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line-17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

	M.S. HERSHEY FOUNDATION			23-6242734
		in a firmal an Office		
Pai	Organizations Maintaining Donor Adv the organization answered "Yes" to For	rised Funds or Other	er Similar Funds o	r Accounts. Complete if
	the organization answered Tes to For	(a) Donor ac		(b) Funds and other accounts
		(a) Donor ac	avised idilds	(b) I unds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year	L		
5	Did the organization inform all donors and donor a			
	funds are the organization's property, subject to the			
6	Did the organization inform all grantees, donors, a			
	used only for charitable purposes and not for the b			
	purpose conferring impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·	Yes No
Pa	Conservation Easements. Complete			orm 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the	•		
	Preservation of land for public use (e.g., recre	eation or pleasure)	Preservation	of an historically important land area
	Protection of natural habitat		Preservation	of a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization h	eld a qualified conse	rvation contribution i	n the form of a conservation
	easement on the last day of the tax year			I total of the Food of the Weet
				Held at the End of the Year
а	Total number of conservation easements			
þ	Total acreage restricted by conservation easement			
С	Number of conservation easements on a certified		• •	l I
d	Number of conservation easements included in (c	•		
3	Number of conservation easements modified, tran	nsferred, released, e	xtınguished, or termii	nated by the organization during
	the tax year ▶			
4	Number of states where property subject to conse			
5	Does the organization have a written policy regard	-		- 1 1 1
	violations, and enforcement of the conservation ea			
6	Staff and volunteer hours devoted to monitoring, in	nspecting, and enfor	cing conservation ea	sements during the year
	>			
7	Amount of expenses incurred in monitoring, inspec	cting, and enforcing o	conservation easeme	ents during the year
	> \$			
8	Does each conservation easement reported on lin			
	170(h)(4)(B)(I) and $170(h)(4)(B)(II)$?			
9	In Part XIV, describe how the organization reports	conservation easem	ients in its revenue ar	nd expense statement, and
	balance sheet, and include, if applicable, the text		organization's financ	cial statements that describes
	the organization's accounting for conservation eas			
Pa	rt III Organizations Maintaining Collections Complete if the organization answered			er Similar Assets.
10			· · · · · · · · · · · · · · · · · · ·	statement and halance sheet weeks a
1a	If the organization elected, as permitted under S art, historical treasures, or other similar assets he	eld for public exhibiti	on, education, or res	search in furtherance of public service
	provide, in Part XIV, the text of the footnote to its f	ınancıal statements tl	nat describes these it	ems
b	If the organization elected, as permitted under S	SFAS 116, to report	ın ıts revenue state	ment and balance sheet works of art
	historical treasures, or other similar assets held		n, education, or rese	earch in furtherance of public service
	provide the following amounts relating to these ite			.
	(i) Revenues included in Form 990, Part VIII, line			
	(ii) Assets included in Form 990, Part X			▶ \$

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

following amounts required to be reported under SFAS 116 relating to these items.

Schedule D (Form 990) 2009

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Par	t III 🔻 Organizations Maintaini	ng Collection	ons of Art, H	storical	Treasures	, or Otl	ner Similar A	issets (continued)	
	2.27							<u>, </u>	_	
3 ,	Using the organization's acquisition	n, accession,	and other reco	ords, che	ck any of th	e follow	ing that are a	sıgnıfıcaı	nt use of its	
	collection items (check all that app	ly)								
а	X Public exhibition		d		Loan or ex	change p	orograms			
b	X Scholarly research		е		Other					
С	X Preservation for future ge	nerations								
4	Provide a description of the organi	zation's collec	ctions and exp	laın how t	hey further	the orga	anızatıon's exe	empt pur	pose in	
	Part XIV									
5	During the year, did the organization	on solicit or re	eceive donatio	ns of art,	historical ti	easures	, or other simil	ar		
	assets to be sold to raise funds rat	her than to be	e maintained a	s part of	the organiz	ation's c	ollection?	[Yes X	No
Par	t IV Escrow and Custodial A	rrangemen	ts. Complete	of the or	ganization	answe	red "Yes" to	Form 9	90, Part	
	IV, line 9, or reported ar								•	
		· · · · · · · · · · · · · · · · · · ·	•							
1a	Is the organization an agent, truste	e, custodian	or other intern	nediary fo	r contribution	ons or o	ther assets no	t		
	included on Form 990, Part X?							[Yes	No
b	If "Yes," explain the arrangement in							,		
	3		,		,		A	mount		
С	Beginning balance					1c				
d	Additions during the year					1d				
	Distributions during the year						•			
f	Ending balance				1	-				
2a	Did the organization include an am								Yes	No
b	If "Yes," explain the arrangement in							(
Par			anization an	swered '	Yes" to Fo	rm 990	. Part IV. line	10.		
	· · · · · · · · · · · · · · · · · · ·	(a) Current Y		ıor year	(c) Two ye		(d) Three year		(e) Four years b	ack
1 a	Beginning of year balance	20,214,	188 28,	927,435				,		$\neg \neg$
b	Contributions	1,686,								\neg
С	Net investment earnings, gains,						· · · · · · · · · · · · · · · · · · ·			
	and losses	1,712,	890 -3.	996,038					1	
d	Grants or scholarships		,	,						
	Other expenditures for facilities .									
	and programs	1,663,	788 4.	717,209.						ŀ
f	Administrative expenses	1,000,		7.00						\dashv
	End of year balance	21,949,	743 20	214 188					-	
2										
	a Board designated or quasi-endowment ► %									
b	b Permanent endowment > %									
С	c Term endowment ▶ 100.0000 %									
	3a Are there endowment funds not in the possession of the organization that are held and administered for the									
	organization by									
	(i) unrelated organizations									
	(i) unrelated organizations									
b	If "Yes" to 3a(ii), are the related org								3b X	
4	Describe in Part XIV the intended i	-	•							
Par	t VI Investments - Land, Bui		<u> </u>			rt X. line	e 10.		·	
	Description of investment		a) Cost or other ba) Cost or other) Accumulated		(d) Book value	
	, , , , , , , , , , , , , , , , , , ,	,	(investment)		basis (other)		depreciation	,	(a) Doon value	
1a	Land		•		1,0	00.	-		1,00	50.
b	Buildings	🗀		2	1,962,0		1,333,297		20,628,7	
С	Leasehold improvements		-		8,229,8		1,111,919	•	4,117,88	
	Equipment				2,250,9		1,115,550		1,135,30	
	Other				117,7		22,431	•	95,35	
	il. Add lines 1a through 1e (Column		ual Form 990.	Part X. co					25,978,38	
		,,_,,			1-7,	- (-, /		0-1-	dule D (Form 990)	

Part VIII	Investments - Other Securities. See Fe	orm 990, Part X, line	e 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	ion et value
Financial d	erivatives			
	d equity interests			
Total (Colum	n (b) must equal Form 990, Part X, col (B) line 12)			<u>-</u>
		orm 000 Port V Jin	2 12	
Part VIII	Investments - Program Related. See F			
	(a) Description of investment type	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
	- ··· - · · · · · · · · · · · · · · · ·		Cost of end-of-year mark	let value
				
	· · · · · · · · · · · · · · · · · · ·			
Total (Colum	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. See Form 990, Part X, II	ne 15	<u> </u>	
TUITIA		Description		(b) Book value
	(u)	Description		(b) Dook value
		 		
		· · · · · ·		
		 	<u> </u>	
	1.00			
	- arres-5.			
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 15)			
Part X	Other Liabilities. See Form 990, Part X			
1.	(a) Description of liability	(b) Amount		
Federal inc		X - 7 - 11.10 mills		
	POST RETIREMENT BEN OB	3,408,769.		
	ARANTEE OBLIGATION	14,613,807.		
TIMITKES	T RATE SWAP LIABILITY	480,700.		
		-		
Total (Colum	n (b) must equal Form 990, Part X, col (B) line 25)	18,503,276.		
TOTAL (COMM	in (b) must equal to this 990, Falt A, col (b) lifte 25)	10,000,270.		

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

SEE PAGE 5

COLLECTIONS OF ART, HISTORICAL TREASURERS, AND OTHER SIMILAR ASSETS SCHEDULE D, PART III, LINE 4

THE M.S. HERSHEY FOUNDATION'S COLLECTION INCLUDES THE FOLLOWING: (1) ARTIFACTS AND HISTORICAL ORAL AND WRITTEN DOCUMENTS RELATED TO THE LIFE AND LEGACY OF MILTON S. HERSHEY FROM HIS PERSONAL LIFE TO HIS VARIOUS BUSINESSES TO HIS PHILANTHROPIES (2) ARTIFACTS AND HISTORICAL ORAL AND WRITTEN DOCUMENTS RELATED TO THE COMMUNITY OF HERSHEY (3) ARTIFACTS THAT DOCUMENT PENNSYLVANIA GERMAN CULTURE (4) ETHNOGRAPHIC MATERIALS RELATED TO INDIGENOUS PEOPLE OF THE UNITED STATES (5) PLANTINGS AT THE HERSHEY GARDEN THE ABOVE COLLECTIONS FURTHER M.S. HERSHEY FOUNDATION'S EXEMPT PURPOSE OF EDUCATION AND CULTURAL ENRICHMENT FOR THE RESIDENTS OF THE HERSHEY AREA BY BEING DISPLAYED IN AN ACCESSIBLE PUBLIC MUSEUM, PUBLIC ARCHIVE AND GARDENS.

INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS SCHEDULE D, PART V, LINE 4

MILTON S. HERSHEY MADE HIS GIFT TO THE M.S. HERSHEY FOUNDATION ON DECEMBER 5, 1935 WITH THE PURPOSE OF CREATING AND ENDOWING IN PERPETUITY THIS FOUNDATION FOR EDUCATIONAL PURPOSES. THE TRUST WAS FUNDED FOR SEVERAL USES, INTENTS AND PURPOSES: FOR THE ESTABLISHMENT AND MAINTENANCE IN WHOLE OR IN PART OF ONE OR MORE EDUCATIONAL INSTITUTIONS IN DERRY TOWNSHIP, PENNSYLVANIA, THE SUPPORT OF PUBLIC SCHOOLS OF DERRY TOWNSHIP AND THE IMPROVEMENT AND ELEVATION OF THE STANDARD OF EDUCATION, AND THE VOCATIONAL, CULTURAL OR PROFESSIONAL EDUCATION OF ANY RESIDENT OF DERRY TOWNSHIP. IN ADDITION, UPON APPROVAL BY THE BOARD OF MANAGERS, THE ENDOWMENT FUNDS CAN BE UTILIZED TO PURCHASE LAND AND ERECT A BUILDING OR

Part XIV Supplemental Information (continued)

BUILDINGS UPON SUCH LAND.

LOAN GUARANTEE OBLIGATION

SCHEDULE D, PART X, OTHER LIABILITIES

THE M.S. HERSHEY FOUNDATION (FOUNDATION) CONSTRUCTED A BUILDING, WHICH IS THE SITE OF THE HERSHEY STORY MUSEUM. IN ORDER TO PROVIDE FUNDING FOR THE PROJECT, THE FOUNDATION ENTERED INTO AGREEMENTS DATED MARCH 1, 2007, WITH THE TOWNSHIP OF DERRY INDUSTRIAL AND COMMERCIAL DEVELOPMENT AUTHORITY (AUTHORITY). UNDER THESE AGREEMENTS, THE FOUNDATION WAS RESPONSIBLE FOR THE CONSTRUCTION OF THE BUILDING. UPON COMPLETION, THE FOUNDATION SOLD THE BUILDING TO THE AUTHORITY AT THE COST TO CONSTRUCT AND LEASED IT BACK FOR \$20,000 PER YEAR FOR A PERIOD OF 29 YEARS, AT WHICH TIME THE BUILDING OWNERSHIP WILL REVERT BACK TO THE FOUNDATION. ADDITION, THE FOUNDATION GUARANTEED A \$9,000,000 NONRECOURSE LOAN BETWEEN THE AUTHORITY AND PNC BANK, NATIONAL ASSOCIATION (PNC BANK) TO FUND THE CONSTRUCTION OF THE PROJECT. DURING DECEMBER 2007, THE FOUNDATION GUARANTEED A FLOATING-TO-FIXED RATE SWAP IN THE NOTIONAL AMOUNT OF \$8,100,000 BETWEEN THE AUTHORITY AND PNC BANK TO MANAGE THE RISK OF INCREASED DEBT SERVICE COST FROM RISING INTEREST RATES. DURING MAY 2008. THE FOUNDATION GUARANTEED AN ADDITIONAL \$6,000,000 NONRECOURSE LOAN BETWEEN THE AUTHORITY AND PNC TO FURTHER FUND THE CONSTRUCTION OF THE PROJECT.

Part XIV Supplemental Information (continued)

SCHEDULE D, PART XI, LINE 8

CHANGE IN UNRECOGNIZED POST RETIREMENT BENEFIT \$333,643

UNREALIZED LOSS ON INTEREST RATE SWAP

(317,788)

\$15,855

SCHEDULE D, PART XII, LINE 2D

CHANGE IN UNRECOGNIZED POST RETIREMENT BENEFIT \$333,643

UNREALIZED LOSS ON INTEREST RATE SWAP

(317,788)

\$15,855

SCHEDULE D, PART XII, LINE 4B

RECLASS - DEACCESSION OF MUSEUM COLLECTION 44,005

SCHEDULE D, PART XIII, LINE 2D

RECLASS - DEACCESSION OF MUSEUM COLLECTION (44,005)

SCHEDULE J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

THE M.S. HERSHEY FOUNDATION

Employer identification number 23-6242734

Part	Questions Regarding Compensation			
	•		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
	If you of the house on line to be about all all the experience follows a western policy removed me provided			
b	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		-
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply			
	Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII. Section A line 1a, with respect to the filing			
-	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a	Х	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of			,,
а	The organization?	6a		X
b	Any related organization?	6b		_X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			.,
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
	subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			.,
	ın Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(ı) Base compensation	(II) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
	ε	0		0				0
GAYLA M BUSH	: E	161,636.	84,475	1,166.	36,759.	10,465.	294,501.	
	Ξ	0		0				0
KENNETH GALL	Ξ	101,855.	21,998.	301.	19,050.	17,771.	160,975.	
	Ξ	0		0.	0			0.
MARY LOUISE PORTER ESQ	€	208,823.	213,755.	0		18,306.	447,779.	
	Ξ							0
VINCENT B RUDISILL	: 🗉	354,744.	675,298	12,277	36,750.	9,254.	1,088,323.	1 1 1 1 1 1 1 1 1 1
	Ξ				0	l		0
JAMES M SHEEHAN ESQ	E	312,851.	! ! ! ! ! !	29,546.	50,519.	11,353.	404,269.	
	Ξ		0					.0
ROBERT C VOWLER	(ii)	139,341.	0.	2,705,086.	15,400.	20,017.	2,879,844.	
	Θ		0		0			.0
ROBERT REESE	3	1,232,843.	0	2,451.	241,793.	28,555.	1,505,642.	
	(i)	0	0	0	0.			0
LEROY S ZIMMERMAN	(ii)	251,750.	40,000.	0	200,000	15,597.	507,347.	
	(9)	0			0			0
ANTHONY J COLISTRA ED D	▣	145,079.	40,000.	59,953.	0	41,778.	286,810.	0
	Ξ		1	1 1 1		 		
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	▣							
							Sche	Schedule J (Form 990) 2009

V 09-8.5

Page 3 23-6242734 Schedule J (Form 990) 2009

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part
for any additional information.
REPORTABLE COMPENSATION
THE M.S. HERSHEY FOUNDATION IS ASSOCIATED WITH THE MILTON HERSHEY SCHOOL
AND SCHOOL TRUST AND OTHER HERSHEY CHARITIES AND FOR-PROFIT ENTITIES.
MR. AND MRS. HERSHEY ORGANIZED THE SCHOOL IN THE FORM OF A TRUST (THE
09 DEED OF TRUST WHIC
' ⊢
UST COMPANY,
I 40,∣
TRUSTEE TO APPOINT THI
THE SCHOOL FROM ITS OWN BOARD OF DIRECTORS. THE MANAGERS SUBSEQUENTLY
HE SCHOOL TRUST, THE RES
S THE MI

Schedule J (Form 990) 2009

V 09-8.5

MR. HERSHEY CREATED THE SAME STRUCTURE FOR THE M.S. HERSHEY FOUNDATION.

SCHOOL TRUST (EIN: 23-1353340).

23-6242734

Schedule J (Form 990) 2009

Page 3

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information. i :1:8--: THE TRUSTEE AND STRUCTURE WHICH LIMITS THE COSTS OF MANAGING AND ADMINISTERING THE MILTON OR AS MEMBER OF THE BOARD OF EITHER CHARITY RECEIVES NO COMPENSATION FOR HIS FOUNDATION'S PAYMENT TO THE HERSHEY TRUST COMPANY FOR TRUSTEE SERVICES MR. HERSHEY ALSO SEVERELY LIMITED BOARD MEMBER SERVING ON THE BOARDS OF ANY OF THE FOUNDATION ARE APPOINTED BY THE HERSHEY TRUST COMPANY IN ITS CAPACITY THE BOARD OF MANAGERS OF THE M.S. HERSHEY THE BOARD OF MANAGERS SERVE AS THE GOVERNING BODY OF THE M.S. HERSHEY ADMINISTERING HIS CHARITIES. PER THE DEED OF TRUST, THE M.S. HERSHEY THE SAME LIMITATION IS IMPOSED ON THE MILTON HERSHEY WAS A VISIONARY IN HIS DESIGN OF AN ORGANIZATIONAL HERSHEY SCHOOL AND SCHOOL TRUST AND THE M.S. HERSHEY FOUNDATION. THE COMPENSATION TO THE HERSHEY TRUST COMPANY FOR MANAGING AND TOGETHER, THE MILTON HERSHEY SCHOOL AND SCHOOL TRUST TRUSTEE FROM AMONG ITS OWN BOARD OF DIRECTORS. HER EFFORTS TO OVERSEE THE CHARITY. OF LIMITED TO \$1,000 PER YEAR. Supplemental Information THE MEMBERS Ø COMPENSATION OF AS A RESULT, BY FOUNDATION PAYMENT Part III THE

Schedule J (Form 990) 2009

Page 3

Part III Supplemental Information

Schedule J (Form 990) 2009

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

THE OF THE FOLLOWING INFORMATION DETAILS THE COMPENSATION ARRANGEMENTS

BY FOR-PROFIT RELATED ENTITIES THE M.S MANAGERS AND OFFICERS, WHO ARE NOT COMPENSATED BY BUT ARE COMPENSATED HERSHEY FOUNDATION, BOARD OF

THE M.S. HERSHEY IN THE INTERESTS OF PROVIDING COMPREHENSIVE DISCLOSURE,

FOUNDATION HAS DECIDED TO TREAT VARIOUS HERSHEY ENTITIES AS "RELATED

ORGANIZATIONS" FOR PURPOSES OF REPORTING ON THE FORM 990 AND SCHEDULES

EVEN THOUGH IT IS UNCERTAIN WHETHER THEY CONSTITUTE RELATED ORGANIZATIONS

FOR PURPOSES OF FORM 990 (SEE SCHEDULE R).

GOVER - COMPENSATION REPORTED CONSISTS ONLY OF DIRECTOR FEES RAYMOND L.

RECEIVED FROM A RELATED FOR-PROFIT COMPANY, HERSHEY TRUST COMPANY (EIN

NONE OF THE COMPENSATION WAS PAID BY THE M.S. HERSHEY 23-0692150). FOUNDATION (EIN 23-6242734). THE HOURS WORKED PER WEEK ON PART VII,

HERSHEY FOUNDATION ONLY. ALTHOUGH THE TAX REPORTING PERIOD IS

QUESTION 1A, COLUMN (B) REFLECTS TIME DEVOTED TO THE M.S

SECTION A,

8/1/09-12/31/09, COMPENSATION REPORTED IS FOR THE PERIOD 1/1/09 TO

12/31/09.

Schedule J (Form 990) 2009

82745U 700P

Page 3 Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information. REDMOND, ESQ - COMPENSATION REPORTED CONSISTS ONLY OF DIRECTOR (EIN 23-0692150). NONE OF THE COMPENSATION WAS PAID BY THE M.S. HERSHEY HERSHEY TRUST COMPANY (EIN FEES RECEIVED FROM A RELATED FOR-PROFIT COMPANY, HERSHEY TRUST COMPANY OF DIRECTOR FEES REFLECTS TIME DEVOTED TO THE M.S. NONE OF THE COMPENSATION WAS PAID BY THE M.S. HERSHEY FOUNDATION (EIN 23-6242734). THE HOURS WORKED PER WEEK ON PART VII, FOUNDATION (EIN 23-6242734). THE HOURS WORKED PER WEEK ON PART VII, 23-6242734 FOR THE PERIOD 1/1/09 HERSHEY FOUNDATION ONLY. ALTHOUGH THE TAX REPORTING PERIOD COMPENSATION REPORTED CONSISTS ONLY RELATED FOR-PROFIT COMPANY, 8/1/09-12/31/09, COMPENSATION REPORTED IS QUESTION 1A, COLUMN (B) Supplemental Information Ø MEAD RECEIVED FROM Schedule J (Form 990) 2009 23-0692150). SECTION A, Σ VELMA A. 12/31/09 JAMES Part III

QUESTION 1A, COLUMN (B) REFLECTS TIME DEVOTED TO THE M.S.

SECTION A,

8/1/09-12/31/09, COMPENSATION REPORTED IS FOR THE PERIOD 1/1/09 TO

12/31/09

HERSHEY FOUNDATION ONLY. ALTHOUGH THE TAX REPORTING PERIOD IS

Page 3

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information. Schedule J (Form 990) 2009 FOUNDATION, EVEN IF THE INDIVIDUAL DOES NOT RECEIVE COMPENSATION FROM THE BASED ON POSITION COMPARABLES HERSHEY TRUST COMPANY NONE OF THE COMPENSATION, REASONABLENESS" PROCEDURE SET OUT IN THE REGULATIONS FOR SECTION 4958 OF FOR THE M.S. HERSHEY FOUNDATION BECAUSE FORM 990 REQUIRES THE REPORTING PAID BY THE HIS COMPENSATION IS REPORTED IN THE FORM 990 MR. REESE'S COMPENSATION AS MANAGING DIRECTOR (CHIEF EXECUTIVE INDEPENDENT COMPENSATION CONSULTANTS USING A PROCESS THAT INDEPENDENT SEE DISCUSSION OF THE HERSHEY TRUST COMPANY COUNSEL OPINES IS IN ACCORDANCE WITH THE "REBUTTABLE PRESUMPTION OF si THE MANAGING OFFICER) AND PRESIDENT OF HERSHEY TRUST COMPANY IS DETERMINED BY REESE HERSHEY MR. REESE RECEIVES NO EMPLOYEE BENEFIT CONTRIBUTIONS OR NON-TAXABLE BENEFITS ARE MR. OF COMPENSATION FROM OTHER ENTITIES RELATED TO THE M.S. AS FOR-PROFIT RELATED CORPORATION. DIRECTOR (CHIEF EXECUTIVE OFFICER) AND PRESIDENT OF SERVICE COMPENSATION FROM THE M.S. HERSHEY FOUNDATION. THIS PROCESS IS FOR MANAGER OF THE M.S. HERSHEY FOUNDATION. SOLELY COMPENSATION IS THE INTERNAL REVENUE CODE. M.S. HERSHEY FOUNDATION. REPORTING ORGANIZATION. Ø (EIN: 23-0692150), REESE ABOVE. ROBERT Part III

Part III Supplemental Information

Schedule J (Form 990) 2009

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

AUTHORITY, AND TAKING INTO ACCOUNT RESPONSIBILITIES AND DUTIES,

OF REESE WORKS 57 HOURS PER WEEK IN HIS POSITION MR. OBJECTIVES. \$334,500 REESE'S COMPENSATION, MR. OF MANAGING DIRECTOR. RETROACTIVE-PAY FOR HIS PRIOR YEAR (2008) SERVICE AS MANAGING DIRECTOR

MR. REESE RECEIVED NO NET AND PRESIDENT THAT WAS NOT PAID UNTIL 2009.

HERSHEY TRUST OF COMPENSATION AS A MEMBER OF THE BOARD OF DIRECTORS AS A MEMBER OF THE HERSHEY ENTERTAINMENT & RESORTS COMPANY OR COMPANY OR THE REESE RETIRED FROM MR. BOARD OF MANAGERS OF MILTON HERSHEY SCHOOL.

COMPANY AND HERSHEY COMPANY PRIOR TO HIS EMPLOYMENT WITH HERSHEY TRUST

A DIRECTOR OF HERSHEY TRUST COMPANY, MILTON BEING APPOINTED AS PRIOR TO MR. REESE RETIREE, Ø AS HERSHEY FOUNDATION. HERSHEY SCHOOL AND THE M.S. RECEIVED PENSION AND BENEFIT COVERAGE FROM THE HERSHEY COMPANY DURING

THESE PAYMENTS ARE REQUIRED TO BE INCLUDED IN THE REPORTING PERIOD. HERSHEY FOUNDATION'S FORM 990 COMPENSATION FIGURES REPORTED ON THE M.S.

NONE OF THESE PAYMENTS WERE MADE BY THE M.S. HERSHEY FOUNDATION.

SECTION A, QUESTION 1A, AVERAGE HOURS PER WEEK, AS REPORTED ON PART VII,

COLUMN (B), REFLECTS TIME DEVOTED TO THE M.S. HERSHEY FOUNDATION ONLY

b DISCLOSED WITH SCHEDULE THE RELATED ENTITIES IS TIME DEVOTED TO

Supplemental Information Schedule J (Form 990) 2009 Part III

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

COMPENSATION TAX REPORTING PERIOD IS 8/1/09-12/31/09, ALTHOUGH THE

FOR THE ENTIRE 2009 CALENDAR YEAR. REPORTED IS - COMPENSATION REPORTED CONSISTS ONLY OF DIRECTOR FEES ZIMMERMAN ა LEROY

(EIN RECEIVED FROM RELATED FOR-PROFIT COMPANIES: HERSHEY TRUST COMPANY

23-0692150), THE HERSHEY COMPANY (EIN 23-0691590) AND HERSHEY

NONE OF THE COMPENSATION RESORTS CO (EIN 23-0691815). W ENTERTAINMENT

THE M.S. HERSHEY FOUNDATION (EIN 23-6242734). THE HOURS WAS PAID BY QUESTION 1A, COLUMN (B) REFLECTS ON PART VII, SECTION A, WORKED PER WEEK

TIME DEVOTED TO THE M.S. HERSHEY FOUNDATION ONLY. ALTHOUGH THE

FOR IS REPORTING PERIOD IS 8/1/09-12/31/09, COMPENSATION REPORTED

PERIOD 1/1/09 TO 12/31/09

- COMPENSATION IS SOLELY FOR SERVICE AS THE TREASURER OF BUSH GAYLA M.

OF HERSHEY TRUST HERSHEY TRUST COMPANY AND VICE PRESIDENT, FINANCE,

COMPANY, HERITAGE TRUSTS (EIN: 23-0692150), A FOR-PROFIT RELATED

BUSH WAS ELECTED ASSISTANT SECRETARY/ASSISTANT MS. CORPORATION. MS. BUSH THE M.S. HERSHEY FOUNDATION ON JULY 15, 2009. TREASURER OF

Schedule J (Form 990) 2009

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part or any additional information.

NONE OF THE COMPENSATION FROM THE M.S. HERSHEY FOUNDATION. 8 RECEIVES

EMPLOYEE BENEFIT CONTRIBUTIONS OR NON-TAXABLE BENEFITS ARE COMPENSATION, HER COMPENSATION IS REPORTED IN THE PAID BY THE M.S. HERSHEY FOUNDATION.

FOR THE M.S. HERSHEY FOUNDATION BECAUSE FORM 990 REQUIRES THE FORM 990

က THE REPORTING OF COMPENSATION FROM OTHER ENTITIES RELATED TO RECEIVE COMPENSATION HERSHEY FOUNDATION, EVEN IF THE INDIVIDUAL DOES NOT

THE HERSHEY TRUST SEE DISCUSSION OF FROM THE REPORTING ORGANIZATION.

MS. BUSH'S COMPENSATION AS TREASURER OF HERSHEY TRUST COMPANY ABOVE.

OF HERSHEY TRUST COMPANY, HERITAGE COMPANY AND VICE PRESIDENT, FINANCE,

THIS TRUSTS IS DETERMINED BY INDEPENDENT COMPENSATION CONSULTANTS.

PROCESS IS BASED ON POSITION COMPARABLES TAKING INTO ACCOUNT

BUSH WORKS MS. RESPONSIBILITIES AND DUTIES, AUTHORITY, AND OBJECTIVES. 53 HOURS PER WEEK IN HER POSITION OF TREASURER OF HERSHEY TRUST COMPANY

AND VICE PRESIDENT, FINANCE, OF HERSHEY TRUST COMPANY, HERITAGE TRUSTS

QUESTION THE AVERAGE HOURS PER WEEK, AS REPORTED ON PART VII, SECTION A,

Ы ONLY. TIME DEVOTED TO THE RELATED ENTITIES IS DISCLOSED WITH SCHEDULE 1A, COLUMN (B), REFLECTS TIME DEVOTED TO THE M.S. HERSHEY FOUNDATION

COMPENSATION ALTHOUGH THE TAX REPORTING PERIOD IS 8/1/09-12/31/09,

	on, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also co
	es 1a, 1b, 4c,
	for Part I, line
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tal Information	complete this part to provide the information
3 Supplement	mplete this part to
Part III	Com

mplete this gart for any additional information.

THE ENTIRE 2009 CALENDAR YEAR.

FOR

REPORTED IS

 S SERVICE AS THE DIRECTOR OF REAL	-0692150), A FOR-PROFIT RELATED
 KENNETH GALL - COMPENSATION IS SOLELY FOR SERVICE AS THE DIRECTOR OF REAL	ESTATE OF HERSHEY TRUST COMPANY (EIN: 23-0692150), A FOR-PROFIT RELATED

1

HE WAS ASSISTANT SECRETARY/ASSISTANT TREASURER OF THE M.S. CORPORATION.

MR. GALL RECEIVES NO HERSHEY FOUNDATION UNTIL JULY 15, 2009. COMPENSATION FROM THE M.S. HERSHEY FOUNDATION. NONE OF THE COMPENSATION,

EMPLOYEE BENEFIT CONTRIBUTIONS OR NON-TAXABLE BENEFITS ARE PAID BY THE

M.S. HERSHEY FOUNDATION. HIS COMPENSATION IS REPORTED IN THE FORM 990

FOR THE M.S. HERSHEY FOUNDATION BECAUSE FORM 990 REQUIRES THE REPORTING

OF COMPENSATION FROM OTHER ENTITIES RELATED TO THE M.S. HERSHEY

FOUNDATION, EVEN IF THE INDIVIDUAL DOES NOT RECEIVE COMPENSATION FROM THE

REPORTING ORGANIZATION. SEE DISCUSSION OF THE HERSHEY TRUST COMPANY

MR. GALL'S COMPENSATION AS DIRECTOR OF REAL ESTATE OF HERSHEY ABOVE. TRUST COMPANY IS DETERMINED BY INDEPENDENT COMPENSATION CONSULTANTS. THIS

MR. GALL WORKS PROCESS IS BASED ON POSITION COMPARABLES TAKING INTO ACCOUNT RESPONSIBILITIES AND DUTIES, AUTHORITY, AND OBJECTIVES. 54 HOURS PER WEEK IN HIS POSITION OF DIRECTOR OF REAL ESTATE. THE AVERAGE

Schedule J (Form 990) 2009

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Supplemental Information Part III

Schedule J (Form 990) 2009

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

QUESTION 1A, COLUMN SECTION A, PART VII, AS REPORTED ON HOURS PER WEEK,

HERSHEY FOUNDATION ONLY. TIME REFLECTS TIME DEVOTED TO THE M.S. (B) DEVOTED TO THE RELATED ENTITIES IS DISCLOSED WITH SCHEDULE J. ALTHOUGH

THE TAX REPORTING PERIOD IS 8/1/09-12/31/09, COMPENSATION REPORTED IS FOR

ENTIRE 2009 CALENDAR YEAR THE - MS. PORTER'S COMPENSATION IS SOLELY FOR SERVICE ESO PORTER, MARY LOUISE

AS THE CHIEF COMPLIANCE OFFICER OF HERSHEY TRUST COMPANY AND GENERAL

COUNSEL AND SECRETARY OF HERSHEY TRUST COMPANY, PRIVATE WEALTH MANAGEMENT

SHE WAS GROUP (EIN: 23-0692150), A FOR-PROFIT RELATED CORPORATION. MS. FOUNDATION ON AUGUST 11, 2009. ELECTED SECRETARY OF THE M.S. HERSHEY

NONE HERSHEY FOUNDATION. : : PORTER RECEIVES NO COMPENSATION FROM THE M.

OF THE COMPENSATION, EMPLOYEE BENEFIT CONTRIBUTIONS OR NON-TAXABLE

HER COMPENSATION IS BENEFITS ARE PAID BY THE M.S. HERSHEY FOUNDATION. REPORTED IN THE FORM 990 FOR THE M.S. HERSHEY FOUNDATION BECAUSE FORM 990

REQUIRES THE REPORTING OF COMPENSATION FROM OTHER ENTITIES RELATED TO THE

M.S. HERSHEY FOUNDATION, EVEN IF THE INDIVIDUAL DOES NOT RECEIVE

SEE DISCUSSION OF THE COMPENSATION FROM THE REPORTING ORGANIZATION

23-6242734

Page 3

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Part III Supplemental Information

Schedule J (Form 990) 2009

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

PORTER'S COMPENSATION FROM THE HERSHEY MS. COMPANY ABOVE. HERSHEY TRUST

BY INDEPENDENT COMPENSATION CONSULTANTS USING TRUST COMPANY IS DETERMINED

IS IN ACCORDANCE WITH THE PROCESS THAT INDEPENDENT COUNSEL OPINES

THE Z H "REBUTTABLE PRESUMPTION OF REASONABLENESS" PROCEDURE SET OUT THIS PROCESS SECTION 4958 OF THE INTERNAL REVENUE CODE. FOR REGULATIONS AND POSITION COMPARABLES TAKING INTO ACCOUNT RESPONSIBILITIES NO IS BASED

HOURS PER WEEK PORTER WORKS 50 MS. DUTIES, AUTHORITY, AND OBJECTIVES.

CHIEF COMPLIANCE OFFICER OF HERSHEY TRUST COMPANY AND HER POSITION OF PRIVATE WEALTH GENERAL COUNSEL AND SECRETARY OF HERSHEY TRUST COMPANY,

PORTER WAS FORMERLY EMPLOYED BY THE HERSHEY MS. MANAGEMENT GROUP. TO HER EMPLOYMENT WITH HERSHEY TRUST COMPANY ON MARCH 2 COMPANY PRIOR

2009 AND HER ELECTION AS AN OFFICER OF THE M.S. HERSHEY FOUNDATION ON

PORTER AS AN EMPLOYEE OF THE HERSHEY COMPANY, MS. AUGUST 11, 2009.

RECEIVED COMPENSATION AND BENEFIT COVERAGE FROM THE HERSHEY COMPANY

REQUIRED TO BE INCLUDED IN THE COMPENSATION FIGURES REPORTED ON THE M.S THE AMOUNTS ARE DURING THE CALENDAR YEAR ENDING DECEMBER 31, 2009.

NONE OF THESE PAYMENTS WERE MADE BY THE HERSHEY FOUNDATION'S FORM 990.

REPORTED ON PART AS THE AVERAGE HOURS PER WEEK, M.S. HERSHEY FOUNDATION.

23-6242734 Schedule J (Form 990) 2009

Page 3

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Supplemental Inform	
Part III	

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information

VII, SECTION A, QUESTION 1A, COLUMN (B), REFLECTS TIME DEVOTED TO THE	FOUNDATION ONLY. TIME DEVOTED TO THE RELATED ENTITIES IS	TH SCHEDULE J. ALTHOUGH THE TAX REPORTING PERIOD IS	IS FOR THE ENTIRE 2009 CALENDAR	YEAR.
CTION A, QUEST	RSHEY FOUNDAT		12/31/09, COMI	
VII, SE	M.S. HEI	DISCLOS	8/1/09-12	YEAR.

RUDISILL'S COMPENSATION IS SOLELY FOR SERVICE - MR RUDISILL VINCENT B.

INVESTMENT OFFICER OF HERSHEY TRUST COMPANY, HERITAGE TRUSTS (EIN: AS THE ASSISTANT SECRETARY OF HERSHEY TRUST COMPANY AND THE CHIEF

HE IS TREASURER OF THE 23-0692150), A FOR-PROFIT RELATED CORPORATION.

MR. RUDISILL RECEIVES NO COMPENSATION FROM THE M.S. HERSHEY FOUNDATION.

CONTRIBUTIONS OR NON-TAXABLE BENEFITS ARE PAID BY THE M.S. HERSHEY

M.S. HERSHEY FOUNDATION. NONE OF THE COMPENSATION, EMPLOYEE BENEFIT

HIS COMPENSATION IS REPORTED IN THE FORM 990 FOR THE M.S. FOUNDATION.

HERSHEY FOUNDATION BECAUSE FORM 990 REQUIRES THE REPORTING OF

COMPENSATION FROM OTHER ENTITIES RELATED TO THE M.S. HERSHEY FOUNDATION,

EVEN IF THE INDIVIDUAL DOES NOT RECEIVE COMPENSATION FROM THE REPORTING

ΑΆ. SEE DISCUSSION OF THE HERSHEY TRUST COMPANY ABOVE. ORGANIZATION. Schedule J (Form 990) 2009

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23-6242734

Schedule J (Form 990) 2009	23-6242734 Page 3
Part III Supplemental Information	
Complete this part to provide the information, explanation, or descriptic	or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part
for any additional information.	

SECRETARY OF HERSHEY TRUST COMPANY	1PANY, HERITAGE
HEY TRUST COMPANY	ANY, HERITAGE
RUDISILL'S COMPENSATION AS ASSISTANT SECRETARY OF HERSHEY TRUST COMPANY	AND THE CHIEF INVESTMENT OFFICER OF HERSHEY TRUST COMPANY, HERITAGE
RUDISILL'S COMPENSATION AS	AND THE CHIEF INVESTMENT O

TRUSTS IS DETERMINED BY INDEPENDENT COMPENSATION CONSULTANTS. THIS

PROCESS IS BASED ON POSITION COMPARABLES TAKING INTO ACCOUNT

RESPONSIBILITIES AND DUTIES, AUTHORITY, AND OBJECTIVES. MR. RUDISILL

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WORKS 39 HOURS PER WEEK IN HIS POSITION OF ASSISTANT SECRETARY OF HERSHE	*\$ { 1 1 1 1 1 1 1 1 1 1	TRUST COMPANY AND THE CHIEF INVESTMENT OFFICER OF HERSHEY TRUST COMPA
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YEAR.

AS THE GENERAL COUNSEL OF HERSHEY TRUST COMPANY (EIN: 23-0692150), A

FOR-PROFIT RELATED CORPORATION AND THE VICE PRESIDENT, LEGAL AFFAIRS &

EXTERNAL RELATIONS OF MILTON HERSHEY SCHOOL, WHICH IS PART OF THE MILTON

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

HERSHEY SCHOOL AND SCHOOL TRUST (EIN: 23-1353340), A RELATED TAX-EXEMPT

PURSUANT ORGANIZATION (HERSHEY TRUST COMPANY SERVES AS TRUSTEE AND,

THE DEED OF TRUST, APPOINTS ITS OWN BOARD AS THE MANAGERS OF THE MILTON

HERSHEY S. OF THE HE WAS SECRETARY HERSHEY SCHOOL AND SCHOOL TRUST).

COMPENSATION SHEEHAN RECEIVES NO MR. FOUNDATION UNTIL AUGUST 10, 2009

EMPLOYEE NONE OF THE COMPENSATION, HERSHEY FOUNDATION. FROM THE M.S.

PAID BY THE M.S. BENEFIT CONTRIBUTIONS OR NON-TAXABLE BENEFITS ARE THE FOR FORM 990 IN THE HIS COMPENSATION IS REPORTED HERSHEY FOUNDATION.

THE REPORTING M.S. HERSHEY FOUNDATION BECAUSE FORM 990 REQUIRES COMPENSATION FROM OTHER ENTITIES RELATED TO THE M.S. HERSHEY FOUNDATION,

Σ Έ SEE DISCUSSION OF THE HERSHEY TRUST COMPANY ABOVE. ORGANIZATION.

EVEN IF THE INDIVIDUAL DOES NOT RECEIVE COMPENSATION FROM THE REPORTING

SHEEHAN'S COMPENSATION AS GENERAL COUNSEL OF HERSHEY TRUST COMPANY AND

THE VICE PRESIDENT, LEGAL AFFAIRS & EXTERNAL RELATIONS OF MILTON HERSHEY

SCHOOL IS DETERMINED BY INDEPENDENT COMPENSATION CONSULTANTS USING

PROCESS THAT INDEPENDENT COUNSEL OPINES IS IN ACCORDANCE WITH THE

"REBUTTABLE PRESUMPTION OF REASONABLENESS" PROCEDURE SET OUT IN THE

THIS PROCESS FOR SECTION 4958 OF THE INTERNAL REVENUE CODE. REGULATIONS Schedule J (Form 990) 2009

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Page 3 23-6242734 Schedule J (Form 990) 2009

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Supplemental Information
Part III

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

POSITION COMPARABLES TAKING INTO ACCOUNT RESPONSIBILITIES AND SHEEHAN WORKS 15 HOURS PER WEEK MR. DUTIES, AUTHORITY, AND OBJECTIVES. NO IS BASED

OF HERSHEY TRUST COMPANY AND 40 HOURS IN HIS POSITION AS GENERAL COUNSEL

PER WEEK IN HIS POSITION AS VICE PRESIDENT, LEGAL AFFAIRS & EXTERNAL

AS THE AVERAGE HOURS PER WEEK, RELATIONS OF MILTON HERSHEY SCHOOL.

REPORTED ON PART VII, SECTION A, QUESTION 1A, COLUMN (B), REFLECTS TIME

TIME DEVOTED TO THE RELATED DEVOTED TO THE M.S. HERSHEY FOUNDATION ONLY.

ALTHOUGH THE TAX REPORTING PERIOD ENTITIES IS DISCLOSED WITH SCHEDULE J.

FOR THE ENTIRE 2009 CALENDAR IS 8/1/09-12/31/09, COMPENSATION REPORTED IS

YEAR.

COLISTRA WAS A DIRECTOR OF A RELATED - DR. ı 0.1 ED. ANTHONY J. COLISTRA,

FOR-PROFIT COMPANY, HERSHEY TRUST COMPANY (EIN 23-0692150) AND A RELATED

TAX-EXEMPT ORGANIZATION, THE MILTON S. HERSHEY SCHOOL & SCHOOL TRUST (EIN

23-1353340) UNTIL DECEMBER 2007. HE WAS ALSO A BOARD MEMBER OF HERSHEY

ENTERTAINMENT & RESORTS (EIN 23-0691815), A COMPANY WHOLLY OWNED BY

IN AUGUST 2009, MILTON HERSHEY SCHOOL TRUST, UNTIL JULY 2009.

COLISTRA WAS APPOINTED THE PRESIDENT OF MILTON HERSHEY SCHOOL

Schedule J (Form 990) 2009

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Part III Supplemental Information
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.
COMPENSATION REPORTED CONSISTS ONLY OF DIRECTOR FEES HERSHEY
ENTERTAINMENT & RESORTS COMPANY AND SALARY AND BENEFITS FROM MILTON
HERSHEY SCHOOL. NONE OF THE COMPENSATION, EMPLOYEE BENEFIT
CONTRIBUTIONS, OR OTHER ALLOWANCES ARE PAID BY THE M.S. HERSHEY
FOUNDATION (EIN 23-6242734). THE HOURS WORKED PER WEEK ON PART VII,
SECTION A, QUESTION 1A, COLUMN (B), REFLECTS TIME DEVOTED TO THE M.S.
ALTHOUGH THE TAX REPORTIN
TION REPORTED IS
ROBERT C. VOWLER - MR. VOWLER WAS AN OFFICER AND DIRECTOR OF THE M.S.
ERSHE.
ATED FOR-P
IRECTOR OF A RELATED FOR-PROFIT COME
RTS (EIN: 23-0691815) UNTIL APRIL 2008. COMPENSAT
3Y HERSHEY TRUST CC
CUTED APRIL 7, 2008 AND NON-TAXABLE BENEFIT
RTAINMENT AND RESORTS DURIN

Part III Supplemental Information
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information
COMPENSATION, EMPLOYEE BENEFIT CONTRIBUTIONS, OR OTHER ALLOWANCES ARE
PAID BY THE M.S. HERSHEY FOUNDATION (EIN 23-6242734) OR THE MILTON
HERSHEY SCHOOL AND SCHOOL TRUST (EIN: 23-1353340). THE HOURS WORKED PER
WEEK ON PART VII, SECTION A, QUESTION 1A, COLUMN (B), REFLECTS TIME
DEVOTED TO THE M.S. HERSHEY FOUNDATION ONLY. ALTHOUGH THE TAX REPORTING
PERIOD IS 8/1/09-12/31/09, COMPENSATION REPORTED IS FOR THE PERIOD 1/1/09
TO 12/31/09.
SCHEDULE J, PART I, QUESTION 4A
ROBERT C. VOWLER WAS PAID BY A RELATED ORGANIZATION \$140,000 AS A
SEVERANCE PAYMENT.
MARTA HOWELL WAS PAID BY THE FILING ORGANIZATION \$36,253 AS A SEVERANCE
PAYMENT.
Schedule J (Form 990) 2009

Somplete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part or any additional information.
SCHEDULE J, PART I, QUESTION 4B
DONALD PAPSON WAS PAID BY A RELATED ORGANIZATION FROM A SUPPLEMENTAL
EMENT PLAN
C. VOWLE
NONQUALIFIED RETIREMENT PLAN \$2,705,086.

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

OMB No 1545-0047

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

THE M.S. HERSHEY FOUNDATION

Employer identification number

23-6242734

ATTACHMENT 1

CHANGE IN TAX YEAR END

SHORT PERIOD TAX RETURN AUGUST 1, 2009 - DECEMBER 31, 2009

THE M.S. HERSHEY FOUNDATION CHANGED ITS TAX YEAR END FROM JULY 31 TO

DECEMBER 31. THIS 2009 FORM 990 IS A SHORT PERIOD TAX RETURN FOR THE

PERIOD AUGUST 1, 2009 TO DECEMBER 31, 2009.

SUMMARY SECTION

FORM 990, PART I, LINE 6

VOLUNTEERS ARE A VITAL PART OF THE M.S. HERSHEY FOUNDATION. MANY OF OUR VOLUNTEERS HAVE INTRODUCED A CHILD TO HISTORY, NATURE OR LIVE THEATRE.

OTHERS HAVE HELPED BEAUTIFY HERSHEY GARDENS, USHERED A SHOW AT THE HERSHEY THEATRE OR PROUDLY ANSWERED QUESTIONS ABOUT OUR COMMUNITY'S RICH HISTORY AT THE MUSEUM: THE HERSHEY STORY.

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT

FORM 990, PART III, LINE 4D

ARCHIVES - THE HERSHEY COMMUNITY ARCHIVES COLLECTS AND MAINTAINS
HISTORICAL DOCUMENTATION SUCH AS PHOTOGRAPHS, ORAL HISTORIES, AND OTHER
TWO DIMENSIONAL ARTIFACTS CHRONICLING THE HISTORY OF THE COMMUNITY.

EDUCATIONAL PROGRAMMING IS OFFERED TO THE THIRD GRADERS OF THE DERRY
TOWNSHIP SCHOOL DISTRICT AND IN THE FORM OF LECTURES AND DEMONSTRATIONS
AT VARIOUS VENUES.

GOVERNING BODY & MANAGEMENT

ATTACHMENT 1 (CONT'D)

FORM 990, PART VI, SECTION A, LINE 2

SEVERAL OF THE BOARD OF MANAGERS MEMBERS AND OFFICERS OF THE FILING
ORGANIZATION ALSO SERVE AS DIRECTORS AND OFFICERS OF BUSINESS ENTITIES
THAT ARE RELATED TO THIS FILING ORGANIZATION. PLEASE SEE FORM 990,
SCHEDULE R FOR FURTHER INFORMATION.

GOVERNING BODY & MANAGEMENT

FORM 990, PART VI, SECTION A, LINE 3

THE M.S. HERSHEY FOUNDATION HAS SEVERAL OPERATIONS IN HERSHEY, PENNSYLVANIA, INCLUDING THE HERSHEY GARDENS, THE HERSHEY COMMUNITY ARCHIVES, THE HERSHEY THEATRE, THE HERSHEY STORY, AND CHOCOLATETOWN SQUARE, COLLECTIVELY REFERRED TO AS "FOUNDATION OPERATIONS". THESE OPERATIONS EXIST TO PRESERVE AND ENHANCE MILTON HERSHEY'S LEGACY AND COMMUNITY VISION AND TO PROVIDE EDUCATIONAL AND CULTURAL ENRICHMENT TO RESIDENTS AND VISITORS OF HERSHEY, PA. HERSHEY ENTERTAINMENT & RESORTS COMPANY (HE&R), A RELATED FOR PROFIT OPERATION, HAS ESTABLISHED A REPUTATION FOR PROVIDING HIGH QUALITY SERVICES, AND HAS EXTENSIVE EXPERIENCE PROVIDING LIVE PERFORMANCE ENTERTAINMENT, RETAIL, CATERING, FOOD AND BEVERAGE AND ASSOCIATES SERVICES. HE&R OWNS AND OPERATES NUMEROUS ENTERTAINMENT AND HOSPITALITY VENUES IN HERSHEY, PENNSYLVANIA. FOUNDED IN 1927, BY MILTON HERSHEY, HE&R'S MISSION AND GOALS INCLUDE DEMONSTRATING SENSITIVITY ABOUT THE QUALITY OF LIFE FOR THE COMMUNITY AND USING ITS RESERVOIR OF TALENT AND EXPERIENCE TO MAKE A POSITIVE DIFFERENCE WITH THE M.S. HERSHEY FOUNDATION. IN ORDER TO ENHANCE FOUNDATION OPERATIONS AND FURTHER ITS MISSION, THE M.S. HERSHEY FOUNDATION ENTERED INTO A CONTRACT WITH HE&R TO PROVIDE VARIOUS SERVICES INCLUDING THE FOLLOWING:

ATTACHMENT 1 (CONT'D)

- 1. WEDDING, PARTY AND EVENT CATERINGS
- 2. RETAIL OPERATIONS SUPPORT
- THEATRE OPERATIONS MANAGEMENT
- 4. IT, COMMUNICATIONS AND SECURITY SERVICES

PRIOR TO THE COMMENCEMENT OF SERVICES, THE M.S. HERSHEY FOUNDATION,

ASSISTED BY INDEPENDENT OUTSIDE COUNSEL, EVALUATED THE PROPOSED SERVICES

TO ENSURE COMPLIANCE WITH INTERMEDIATE SANCTIONS RULES PURSUANT TO IRC

SECTION 4958 AND PRIVATE INUREMENT RULES PURSUANT TO TREASURY REGULATIONS

53.4958-4. THESE SERVICES ARE REVIEWED AND APPROVED BY THE BOARD OF

MANAGERS ON AN ANNUAL BASIS. THE M.S. HERSHEY FOUNDATION HAS ESTABLISHED

AN INDEPENDENT COMMITTEE TO PERIODICALLY REVIEW THE SERVICES BEING

PERFORMED AND THE CONTRACTUAL RELATIONSHIP WITH HE&R TO ENSURE IT IS IN

THE BEST INTEREST OF THE M.S. HERSHEY FOUNDATION TO CONTINUE USING THE

SERVICES OF HE&R AND TO ENSURE COMPLIANCE WITH THE IRC SECTION AND

TREASURY REGULATION NOTED ABOVE.

FORM 990 REVIEW PROCESS

FORM 990, PART VI, SECTION B, LINE 11A

THE FORM 990 IS PREPARED UNDER THE DIRECTION OF THE DIRECTOR OF FINANCE OF THE M.S. HERSHEY FOUNDATION. THE FORM 990 IS REVIEWED BY ADDITIONAL MEMBERS OF THE M.S. HERSHEY FOUNDATION, OUTSIDE COUNSEL AND ITS INDEPENDENT TAX ADVISORS WHO SIGN THE RETURN AS "PAID PREPARERS." THE BOARD OF MANAGERS OF THE M.S. HERSHEY FOUNDATION REVIEWS AND DISCUSSES THE FORM 990 AT ONE OF ITS SCHEDULED MEETINGS PRIOR TO FILING THE RETURN WITH THE INTERNAL REVENUE SERVICE. ADDITIONALLY, THE FORM 990 IS

ATTACHMENT 1 (CONT'D)

PROVIDED TO THE FULL BOARD OF MANAGERS, NOTING KEY DISCLOSURES, PRIOR TO

THE FILING OF THE FORM 990 WITH THE INTERNAL REVENUE SERVICE.

CONFLICT OF INTEREST

FORM 990, PART VI, SECTION B, LINE 12C

THE BOARD OF MANAGERS, OFFICERS AND KEY EMPLOYEES OF THE M.S. HERSHEY FOUNDATION HAVE A FIDUCIARY RELATIONSHIP WITH THE M.S. HERSHEY FOUNDATION WHICH REQUIRES THAT THEY ACT IN GOOD FAITH WITH REGARD TO THE M.S. HERSHEY FOUNDATION'S BEST INTERESTS. IT IS ESSENTIAL IN FULFILLING THEIR DUTIES THAT THEY APPLY THE HIGHEST MORAL, LEGAL, AND ETHICAL STANDARDS IN THEIR CONDUCT AND BUSINESS RELATIONSHIPS. THE HERSHEY TRUST COMPANY, TRUSTEE FOR THE M.S. HERSHEY FOUNDATION, HAS WRITTEN CONFLICT OF INTEREST POLICES WHICH ARE INTENDED TO PERMIT THE M.S. HERSHEY FOUNDATION AND ITS MANAGERS, OFFICERS AND OTHER KEY EMPLOYEES TO IDENTIFY, EVALUATE AND ADDRESS ANY CONFLICT OF INTEREST THAT MIGHT CALL INTO QUESTION THIS FIDUCIARY DUTY TO THE M.S. HERSHEY FOUNDATION. THE CONFLICT OF INTEREST POLICY COVERING THE MANAGERS IS DOCUMENTED IN THE CONFLICT OF INTEREST SECTION OF THEIR GOVERNANCE GUIDELINES. THE CONFLICT OF INTEREST POLICY COVERING OFFICERS AND OTHER KEY EMPLOYEES OF HERSHEY TRUST COMPANY, TRUSTEE FOR THE M.S. HERSHEY FOUNDATION IS DOCUMENTED IN POLICY 1.3 ETHICAL STANDARDS AND POLICY 1.5 CONFLICT OF INTEREST OF ITS EMPLOYEE POLICY MANUAL AND POLICY 1.02 CODE OF CONDUCT OF ITS POLICY MANUAL. MANAGER, OFFICER AND KEY EMPLOYEE IS REQUIRED TO AVOID ALL ACTIVITY THAT COULD CREATE A CONFLICT OF INTEREST OR EVEN GIVE AN APPEARANCE OF A CONFLICT OF INTEREST. ANY CONFLICTS OF INTEREST ARE TO BE REPORTED AS SOON AS PRACTICAL AFTER THEY BECOME AWARE OF SUCH A CONFLICT. ANNUALLY EACH MANAGER (IN EFFECT FOR THE TAX YEAR ENDING 7/31/2009), OFFICER AND

ATTACHMENT 1 (CONT'D)

KEY EMPLOYEE (IN EFFECT FOR THE TAX YEAR BEGINNING 8/1/2009) IS REOUIRED TO COMPLETE AN ANNUAL STATEMENT OF DISCLOSURE. THE FORMS IDENTIFY VENDORS, INVESTMENTS, OTHER BOARD MEMBERSHIPS, AND FAMILY MEMBERS THAT COULD GIVE RISE TO CONFLICTS OF INTEREST. THE STATEMENTS ARE REVIEWED BY THE FOUNDATION'S EXECUTIVE DIRECTOR AND THE DIRECTOR OF FINANCE IN ORDER FOR THEM TO BE AWARE OF ACTIVITIES THAT COULD GIVE RISE TO CONFLICTS OF INTEREST. POTENTIAL CONFLICTS OF INTEREST RELATED TO MANAGERS, OFFICERS AND KEY EMPLOYEES ARE BROUGHT TO THE ATTENTION OF THE PRESIDENT OF THE BOARD OF MANAGERS OF THE M.S. HERSHEY FOUNDATION. THE PRESIDENT (OR HIS DESIGNEE) DETERMINES THE CORRECTIVE MEASURE, IF ANY, TO BE TAKEN TO RESOLVE THE CONFLICT, OR WILL IMPOSE APPROPRIATE RESTRICTIONS, IF ANY ON THE PERSON WITH THE CONFLICT. FOR CONFLICTS OF INTEREST INVOLVING THE PRESIDENT, THE MATTER WOULD BE DISCUSSED WITH THE CHAIR OF THE AUDIT COMMITTEE AND THE CHAIR OF THE BOARD OF THE HERSHEY TRUST COMPANY. THE TWO CHAIR PERSONS, IN CONSULTATION WITH THE OTHER BOARD MEMBERS, EXCLUDING SUCH CONFLICTED PERSON, HAVE THE FINAL APPROVAL OF ANY RECOMMENDED CORRECTIVE MEASURES OR IMPOSED RESTRICTIONS.

COMPENSATION PROCESS

FORM 990, PART VI, SECTION B, LINES 15A AND 15B

THE M.S. HERSHEY FOUNDATION'S BOARD OF MANAGERS (THE GOVERNING BODY OF THE M.S. HERSHEY FOUNDATION) CONTROLS THE PROCESS IN DETERMINING WHETHER THE TOTAL COMPENSATION OF THE EXECUTIVE DIRECTOR IS FAIR AND REASONABLE. THIS PROCESS OCCURS AT THE INITIAL HIRE OF THE EXECUTIVE DIRECTOR AND AT REGULAR INTERVALS THEREAFTER. THE REVIEW OF THE TOTAL COMPENSATION OF THE EXECUTIVE DIRECTOR, INCLUDES BUT IS NOT LIMITED TO, A REVIEW OF COMPARABLE EXECUTIVE DIRECTOR TOTAL COMPENSATION AS DISCLOSED IN THE

ATTACHMENT 1 (CONT'D)

FORMS 990 OF SIMILAR-SIZED EXEMPT ORGANIZATIONS. AS PART OF THIS

PROCESS, THE COMPENSATION INFORMATION IS REVIEWED AND APPROVED BY THE

BOARD OF MANAGERS FOR THE EXECUTIVE DIRECTOR. THOSE BOARD OF MANAGERS

WITH A CONFLICT IN REGARD TO THE EXECUTIVE DIRECTOR'S COMPENSATION REVIEW

PROCESS ABSTAIN FROM THE DELIBERATIONS.

THE BOARD OF MANAGERS DO NOT RECEIVE ANY COMPENSATION FROM M.S. HERSHEY FOUNDATION. THE BOARD OF MANAGERS RECEIVE COMPENSATION FROM HERSHEY TRUST COMPANY AS DIRECTORS OF THE TRUST COMPANY IN ACCORDANCE WITH SECTION 16 OF ITS BYLAWS. THE COMPENSATION IS PERIODICALLY REVIEWED BY THIRD PARTY COMPENSATION CONSULTANTS. ANY MEMBER OF THE BOARD OF MANAGERS WHO ALSO SERVES AS A DIRECTOR OR OFFICER OF THE HERSHEY COMPANY OR OF HERSHEY ENTERTAINMENT & RESORTS CO. RECEIVES COMPENSATION FROM SUCH RELATED FOR-PROFIT COMPANY, PURSUANT TO SUCH COMPANY'S PROCEDURES.

THE COMPENSATION OF THE M.S. HERSHEY FOUNDATION'S OFFICERS, WHO ARE DIRECTORS OR EMPLOYEES OF THE HERSHEY TRUST COMPANY (TRUSTEE OF M.S. HERSHEY FOUNDATION), IS DETERMINED BY PERIODIC REVIEW (GENERALLY PERFORMED AT LEAST EVERY 3 YEARS) BY THIRD PARTY COMPENSATION CONSULTANTS TO DETERMINE THAT IT IS FAIR AND REASONABLE AS PART OF THE HERSHEY TRUST COMPANY'S COMPENSATION REVIEW PROCESS. THE COMPENSATION OF THE STATUTORY OFFICERS, THE MANAGING DIRECTOR AND COMPLIANCE OFFICER IS FIXED BY THE BOARD OF DIRECTORS OF HERSHEY TRUST COMPANY IN ACCORDANCE WITH SECTION 5 OF ITS BYLAWS. THE PRESIDENT AND MANAGING DIRECTOR OF HERSHEY TRUST COMPANY APPROVES COMPENSATION OF THE OTHER OFFICERS AND KEY EMPLOYEES AND

PUBLIC AVAILABILITY OF GOVERNING DOCUMENTS

HOURS SPENT ON RELATED ORGANIZATIONS

Employer identification number 23-6242734

ATTACHMENT 1 (CONT'D)

REPORTS THIS COMPENSATION TO THE BOARD OF DIRECTORS OR A DESIGNATED

COMMITTEE OF THE BOARD OF DIRECTORS AS ANY CHANGES ARE MADE. ANY OFFICER

OF THE M.S. HERSHEY FOUNDATION WHO ALSO SERVES AS A DIRECTOR OR OFFICER

OF THE HERSHEY COMPANY OR OF HERSHEY ENTERTAINMENT & RESORTS CO. RECEIVES

COMPENSATION FROM SUCH RELATED FOR-PROFIT COMPANY, PURSUANT TO SUCH

COMPANY'S PROCEDURES.

FORM 990, PART VI, SECTION C, LINE 19

THE FOUNDATION MAKES THE DEED OF TRUST AVAILABLE TO THE PUBLIC ON ITS

WEBSITE. THE FOUNDATION'S CONFLICT OF INTEREST POLICY AND ITS AUDITED

FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VII, SECTION A, COLUMN B

THE FOLLOWING TABLE DETAILS M.S. HERSHEY FOUNDATION BOARD OF MANAGERS

MEMBERS AND OFFICERS WHO ARE ALSO BOARD OF MANAGERS MEMBERS AND OFFICERS

OF RELATED ORGANIZATIONS AND THE HOURS SPENT PER WEEK ON DUTIES FOR THESE

RELATED ORGANIZATIONS:

Name of the organization
THE M.S. HERSHEY FOUNDATION

Employer identification number 23-6242734

ATTACHMENT 1 (CONT'D)

MILTON

	HERSHEY		HERSHEY	
	ENTERTAIN	HERSHEY	SCHOOL &	HERSHEY
	& RESORTS	СО	SCHOOL TRUST	TRUST CO.
RAYMOND L. GOVER	-	-	5.5	FOOTNOTE 1
JAMES M. MEAD	-	-	9	FOOTNOTE 1
VELMA A. REDMOND	-	-	6	FOOTNOTE 1
ROBERT REESE	4	-	57	FOOTNOTE 1
LEROY S. ZIMMERMAN	2	2.5	6.5	FOOTNOTE 1
GAYLA M. BUSH	-	-	43	10
KENNETH GALL	-	-	54	FOOTNOTE 1
MARY LOUISE PORTER*	-	-	10	40
VINCENT B. RUDISILL		-	29	10
JAMES M. SHEEHAN	-	-	40	15

Name of the organization
THE M.S. HERSHEY FOUNDATION

Employer identification number 23-6242734

ATTACHMENT 1 (CONT'D)

ANTHONY J. COLISTRA 1.5

ROBERT C. VOWLER

FOOTNOTE 1: TIME SPENT ON HERSHEY TRUST COMPANY MATTERS IS INCLUDED IN

THE AVERAGE HOURS WORKED PER WEEK UNDER THE COLUMN FOR THE MILTON HERSHEY

SCHOOL & SCHOOL TRUST.

* MS. PORTER WAS A FULL-TIME EMPLOYEE OF THE HERSHEY COMPANY FOR THE FIRST TWO MONTHS OF 2009, PRIOR TO HER EMPLOYMENT BY HERSHEY TRUST COMPANY.

FINANCIAL STATEMENTS AUDITED BY INDEPENDENT ACCOUNTANT FORM 990, PART XI, LINE 2B

THE M.S. HERSHEY FOUNDATION CHANGED ITS TAX YEAR END FROM JULY 31 TO DECEMBER 31. AS A RESULT OF THIS CHANGE, THE M.S. HERSHEY FOUNDATION DECIDED TO HAVE ITS INDEPENDENT ACCOUNTANTS CONDUCT AN AUDIT AND PRODUCE FINANCIAL STATEMENTS FOR THE 17-MONTH PERIOD: AUGUST 1, 2008 THROUGH DECEMBER 31, 2009. THE M.S. HERSHEY FOUNDATION DOES NOT HAVE STANDALONE AUDITED FINANCIAL STATEMENTS FOR THE 5-MONTH PERIOD: AUGUST 1, 2009 THROUGH DECEMBER 31, 2009; HOWEVER, THE FINANCIAL INFORMATION FOR THE 5-MONTH PERIOD ENDED DECEMBER 31, 2009, AS PRESENTED ON THIS FEDERAL FORM 990, IS AUDITED FINANCIAL INFORMATION INCLUDED IN THE AUDITED FINANCIAL STATEMENTS FOR THE 17-MONTH PERIOD.

SCHEDULE R - SUPPLEMENTAL DISCLOSURE

SCHEDULE R, PART V, TRANSACTIONS WITH RELATED ORGANIZATIONS

ACCORDING TO THE INSTRUCTIONS TO SCHEDULE R, PART V, TRANSACTIONS WITH

RELATED ORGANIZATIONS, THE FOLLOWING TRANSACTIONS ARE TO BE REPORTED IN

ATTACHMENT 1 (CONT'D)

LINE 2:

- (1) (A) ALL RECEIPTS OR ACCRUALS, REGARDLESS OF THE AMOUNT, OF INTEREST, ANNUITIES, ROYALTIES, OR RENT FROM A CONTROLLED ENTITY; (B) A LOAN MADE TO A CONTROLLED ENTITY*; OR (C) ANY OTHER TRANSFER OF FUNDS BETWEEN THE ORGANIZATION AND THE CONTROLLED ENTITY*
- (2) TRANSACTIONS WITH RELATED TAX-EXEMPT ORGANIZATIONS NOT DESCRIBED IN SECTION 501(C)(3)*
- * THESE TRANSACTIONS ARE TO BE DISREGARDED WHERE THE TOTAL AMOUNTS INVOLVED DO NOT EXCEED \$50,000

ALTHOUGH THE M.S. HERSHEY FOUNDATION IS NOT REQUIRED TO DISCLOSE ITS RELATED PARTY TRANSACTIONS IN SCHEDULE R, PART V, LINE 2 ACCORDING TO THE INSTRUCTIONS ABOVE, THE M.S. HERSHEY FOUNDATION IS ELECTING TO DISCLOSE ALL TRANSACTIONS WITH ITS RELATED PARTIES AS FOLLOWS:

SCHEDULE R, PART V, LINE 1C

GIFT, GRANT OR CAPITAL CONTRIBUTION FROM OTHER ORGANIZATIONS: HERSHEY TRUST COMPANY \$56,273

SCHEDULE R, PART V, LINE 11

LEASE OF FACILITIES, EQUIPMENT OR OTHER ASSETS TO OTHER ORGANIZATION: MILTON HERSHEY SCHOOL AND TRUST \$881 (STORAGE OF THE ARCHIVES) HERSHEY TRUST COMPANY \$732 (STORAGE OF THE ARCHIVES)

SCHEDULE R, PART V, LINE 1J

Page 2

Name of the organization
THE M.S. HERSHEY FOUNDATION

Employer identification number 23-6242734

ATTACHMENT 1 (CONT'D)

LEASE OF FACILITIES, EQUIPMENT OR OTHER ASSETS FROM OTHER ORGANIZATION:

MILTON HERSHEY SCHOOL & SCHOOL TRUST \$1,820 (MUSEUM RENTAL FOR STORAGE

BARN)

|--|

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

DESCRIPTION	GRANTS	EXPENSES	REVENUE
ARCHIVES & MISCELLANEOUS PROGRAM	0.	181,204.	138,928.
TOTALS	0.	181,204.	138,928.

ATTACHMENT 3

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	ENDING BOOK VALUE	COST OR FMV
U.S. COMMON STOCKS/FUNDS	20,614,893.	FMV
CORPORATE BONDS	1,711,076.	FMV
TREASURY BONDS AND NOTES	1,978,595.	FMV
AGENCY BONDS	180,688.	FMV
ALTERNATIVE ASSETS	688,477.	FMV
TOTALS	25,173,729.	

The M.S. Hershey Foundation

EIN: 23-6242734

Tax Period: 8/1/2009 - 12/31/2009

The M.S. Hershey Foundation changed its tax year-end from July 31st to December 31st. This 2009 Form 990 is a short period tax return for the period August 1, 2009 to December 31, 2009.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

THE M.S. HERSHEY FOUNDATION

Part I

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36 or 37. ▼ See separate instructions. ▶ Attach to Form 990.

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33)

OMB No 1545-0047 Open to Public 2009

Inspection

Employer identification number 23-6242734 (f)
Direct controlling
entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (e) End-of-year assets (d) Total income (c) Legal domicile (state or foreign country) (b) Primary activity (a) (a) Name, address, and EiN of disregarded entity Part II

	/				
(8)	(q)	(၁)	(p)	(e)	€
Name, address, and EIN of related organization	Prid	Legal domicile (state or foreign country)	Exempt Code section	Exempt Code section Public charity status (if section 501(c)(3))	Direct controlling entity
THE MILTON HERSHEY SCHOOL & SCHOOL TRUST 23-1353340	0				
PO BOX 445 HERSHEY, PA 17033	SCHOOL	PA	501(C)(3)	2	N/A
DEARDEN HOUSE ADVISORY BOARD 20-2579678	8				
PO BOX 830 HERSHEY, PA 17033	SVCS TO ALUM	PA	501(C)(3)	7	N/A
HERSHEY CEMETERY TRUST 20-6629638	æ				
PO BOX 445 HERSHEY, PA 17033	CMTRY FUNDS	PA	501(C)(13)		N/A
HERSHEY CEMETERY COMPANY 23-1973529	-				
PO BOX 445 HERSHEY, PA 17033	CEMETERY	PA	501(C)(13)		N/A
					4
	# P				•
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For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990

Transactions With Related Organizations (Complete organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.) Part V

4014	a Complete line of it can contitue to leated in Deuts II III or IV of this softential		_	Yes No	0
Į,	Note: Complete line I in any emily is listed in Paris in, in, or we schedule Diving the texturer did the presentation present in any of the following transportance with one or more related presentations letted in Darte II_IV?				
-	Dulling the tax year, and the organization engage it any of the following treats sections with one of more regarded organizations and any		10		×
B	Heceipt of (I) interest (ii) annuities (iii) royaities of (iv) rent from a controlled entity		3 4	╁	×
Φ	Gift, grant, or capital contribution to other organization(s)		2	4	:
c	Giff grant or capital contribution from other organization(s)	•	10	×	
τ	loans or loan quarantees to or for other organization(s)		19		×
3			٩		×
Φ	Loans or loan guarantees by other organization(s)		2	+	1
				+	7>
-	Sale of assets to other organization(s)		=	+	د ا
đ	Purchase of assets from other organization(s)		19		×
ם מ			1 1		×
= .			ï	×	
-	Lease of facilities, equipment, or other assets to other organization(s)				ľ
			, ;	->	
-	Lease of facilities, equipment, or other assets from other organization(s)		=	(>	1
¥	Performance of services or membership or fundraising solicitations for other organization(s)		¥	< :	ł
_	Performance of services or membership or fundraising solicitations by other organization(s).		=	×	1
Ε	Sharing of facilities equipment mailing lists or other assets.	•	1 E		×
	Sharing of naid employees		1 n		×
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(Community and the setting and the community of the commun		10	×]
0	Remindusement paid to other organization for expenses		2		×
٩	Reimbursement paid by other organization for expenses		-	-	1
				•	×
σ:	Other transfer of cash or property to other organization(s)		,	+	: ×
- ,			- - - -	\dashv	:
8	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transfer	and transaction thresholds	splods		-
	(a) Transaction Name of other organization type (a-r)	Amoun	(c) Amount involved	_	
Ξ					
(2)					
(3)					
(4)				• •	
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(2)				'	1
(9)					
		Schedule R (Form 990) 2009	(Form 9	990) 20	60

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Page 4

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Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, Ime 37.) Part VI

Schedule R (Form 990) 2009

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets , or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entry	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3)	(e) Share of end-of-year assets	(f) Disproportionate allocations?	(g) Code V-UBI amount in box 20 of Schedule K-1	(h) General or managing partner?
			organizations?		Yes No	(Form 1065)	Yes
		ı					
							65.0
							•
						Schedule R (Form 990) 2009	990) 2009