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DLN: 93493319020802

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)

2011

OMB No 1545-0047

Open to Public

► The organization may have to use a copy of this return to satisfy state reporting requirements

	the 2	2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-20	011	D Employer i	dentification number
	ck if ap ress cha	THE MS HERSHEY FOUNDATION		23-62427	
	ne chan	Doing Business As		E Telephone	
_	al returr		/acceta	(717)298	3-2200
_ Terr	nınated	63 WEST CHOCOLATE AVENUE	/suite	G Gross receip	ts \$ 28,947,425
_	ended re lication	City or town, state or country, and ZIP + 4 Hershey, PA 17033 pending			
		F Name and address of principal officer	H(a) Is thi	ı s a group retı	ırn for
		DONALD PAPSON 63 W CHOCOLATE AVENUE	affilia		┌Yes ┌ No
		HERSHEY,PA 17033	H(b) Are al	l affiliates incl	uded?
			If "No	o," attach a li	st (see instructions)
		pt status	H(c) Grou	p exemption i	number 🕨
		: ► www mshersheyfoundation org			
		anization	L Year of fo	mation 1935	M State of legal domicile PA
Pai	rt I	Summary			
Governance	Т	riefly describe the organization's mission or most significant activities O PRESERVE AND ENHANCE MILTON HERSHEY'S LEGACY AND COMM ND CULTURAL ENRICHMENT TO THE RESIDENTS OF THE HERSHEY AF		AND TO PRO	OVIDE EDUCATIONAL
ĕ	_				
ģ	2 C	heck this box দ if the organization discontinued its operations or dispose	d of more than 2	5% of its net	assets
	3 N	lumber of voting members of the governing body (Part VI, line 1a) $ \cdot \cdot \cdot $	-	3	!
Activities &	4 N	lumber of independent voting members of the governing body (Part VI, line 1	.b) 	4	(
	5 ⊤	otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	127
[6 T	otal number of volunteers (estimate if necessary)		6	70:
		otal unrelated business revenue from Part VIII, column (C), line 12		7a	-26,43
	bN	let unrelated business taxable income from Form 990-T, line 34		7b	-26,431
			Prio	r Year	Current Year
a.	8	Contributions and grants (Part VIII, line 1h)		3,304,674	1,858,471
를	9	Program service revenue (Part VIII, line 2g)		6,599,077	5,193,116
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,129,207	5,720,105
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		42,285	50,550
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A),	line	11,075,243	12,822,242
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3).		0	12,022,242
	14	Benefits paid to or for members (Part IX, column (A), line 4)	•	0	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), line	e		
\$	13	5–10)	· [2,859,371	3,150,032
Ехрепзея	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	O
<u> </u>	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0			
۳ ۱	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		8,204,118	6,981,904
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	11,063,489	10,131,936
	19	Revenue less expenses Subtract line 18 from line 12		11,754	2,690,306
Not Assets or Fund Balances				of Current ear	End of Year
\$ <u>₹</u>	20	Total assets (Part X, line 16)		59,184,974	58,563,836
25 25	21	Total liabilities (Part X, line 26)		20,570,431	22,487,802
##	22	Net assets or fund balances Subtract line 21 from line 20		38,614,543	
Par	t II	Signature Block			· · · ·
Jnder	penalt edge ar edge.	Sies of perjury, I declare that I have examined this return, including accompanying and belief, it is true, correct, and complete. Declaration of preparer (other than off Signature of officer DONALD C PAPSON EXECUTIVE DIRECTOR	icer) is based on a		
		Type or print name and title			
		Preparer's signature Eric M McNeil	Check if self-employed	Preparer's tax (see instruction	payer identification number ns)
Paid		<u> </u>	employed F		
Prepa	rer's	Firm's name (or yours PricewaterhouseCoopers LLP if self-employed),	employed F	EIN Þ	
	rer's		employed F		(267) 330-3000

Form 990 (2011)	Form	990	(2011)
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age	2
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Par		of Program Serv dule O contains a res		lishments Jestion in this Part III		.
CUL HER GEN	RESERVE AND ENHA TURAL ENRICHMENT SHEY GARDENS, HER	TO THE RESIDENTS	HEY'S LEGACY S OF THE HERS O HERSHEY CO	SHEY AREA, THE FOL MMUNITY ARCHIVE	VISION AND TO PROVIDE INDATION OPERATES THE S THROUGH COUNTLESS TO ENHANCE	HERSHEY STORY, VOLUNTEERS AND
2	the prior Form 990 o	, ,		• ,	which were not listed on	「Yes ▼ No
3	Did the organization services?	cease conducting, or	make sıgnıfıcan	t changes ın how it co	nducts, any program	┌ Yes ┌ No
4	Describe the organizexpenses Section 5	ation's program servic 01(c)(3) and 501(c)(4	ce accomplishm 1) organizations	and section 4947(a)	ree largest program services (1) trusts are required to rep th program service reported	
4a	(Code SEE SCHEDULE O) (Expenses \$	5,095,478	including grants of \$) (Revenue \$	3,959,803)
4b	(Code SEE SCHEDULE O) (Expenses \$	3,688,879	ıncludıng grants of \$) (Revenue \$	1,157,558)
4c	(Code SEE SCHEDULE O) (Expenses \$	496,246	including grants of \$) (Revenue \$	62,871)
4d	Other program serv (Expenses \$	ices (Describe in Sch 244,840 ind	nedule O) cluding grants o	f\$) (Revenue \$	12,884)
40	Total program servi	ce evnencec i	0.525.44	2		

			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	Yes	140
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		N o
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 1	6		No
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> " <i>Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	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.	11b	Yes	
С	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.	11c		No
d	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 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
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 U S? If "Yes," complete Schedule F, Part II and IV.	15		No
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 U S ? If "Yes," complete Schedule F, Part III and IV	16		No
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		No
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	Yes	
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
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		No
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		N o
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
24a	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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		N o
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		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		Νo
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2011)

•	,
Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	. [~	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
L				
D	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1 05	
За	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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 or securities			
	account)?	4a		No
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit any contributions that were not tax deductible?			
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?	74	V	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			_
_	Did the organization receive any funds directly or indirectly, to nay promiums on a personal honefit			
٠	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7g		
h	required?	<i>-</i> /9		
••	Form 1098-C?	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.			
а	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			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
4-	year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
h	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand			
142	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
_		. —		

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

Check if Schedule O contains a response to any question in this Part VI

Se	ection A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year										
b	Enter the number of voting members included in line 1a, above, who are independent										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3	Yes								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No							
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets? .										
6	Did the organization have members or stockholders?	6		Νo							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following										
а	The governing body?	8a	Yes								
b	Each committee with authority to act on behalf of the governing body?	8b	Yes								
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	9		No							
	ection B. Policies (This Section B requests information about policies not required by the Internal										
Re	evenue Code.)		V	N _a							
100	Did the erganization have legal chapters, branches, or affiliates?	10a	Yes	No No							
	Did the organization have local chapters, branches, or affiliates?	10a		NO							
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes								
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes								
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes								
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	In Schedule O how this was done	12c	Yes								
13		12c 13	Yes Yes								
13 14	ın Schedule O how this was done										
	In Schedule O how this was done	13	Yes								
14	In Schedule O how this was done	13	Yes								
14 15 a	In Schedule O how this was done	13	Yes								
14 15 a	In Schedule O how this was done	13 14 15a	Yes Yes Yes								
14 15 a b	In Schedule O how this was done	13 14 15a	Yes Yes Yes								
14 15 a b	In Schedule O how this was done	13 14 15a	Yes Yes Yes	No							
14 15 a b	In Schedule O how this was done	13 14 15a 15b	Yes Yes Yes	No							
14 15 a b	In Schedule O how this was done	13 14 15a 15b	Yes Yes Yes	No							
14 15 a b	In Schedule O how this was done	13 14 15a 15b	Yes Yes Yes	No							
14 15 a b 16a b	In Schedule O how this was done	13 14 15a 15b	Yes Yes Yes	No							

☐ O wn website ☐ A nother's website ☐ Upon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 DONALD PAPSON EXEC DIRECTO 63 WEST CHOCOLATE AVE

HERSHEY, PA 17033 (717) 298-2200

<u>Part VII</u> 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

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any 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, or 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

Check this box if neither the organiz	zation nor any rel	ated or	ganız	atıo	ns c	omper	nsat	ed any current or fo	rmer officer, direct	or, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	related organizations
(1) JAMES M SHEEHAN ESQ BD OF MGRS-PRESIDENT/CHAIRMAN	1 2	Х		х				0	114,002	14,649
(2) RAYMOND L GOVER BD OF MGRS-PRES/CHRMN TO 3/11	4	х		Х				0	51,875	2,367
(3) JAMES M MEAD BOARD OF MANAGERS	3	х						0	175,847	83,466
(4) VELMA A REDMOND ESQ BOARD OF MANAGERS	6	х						0	120,417	2,367
(5) ROBERT REESE BOARD OF MANAGERS TO 2/11	0 0	х						0	0	0
(6) LEROY S ZIMMERMAN BOARD OF MANAGERS	3	Х						0	1,289,216	56,673
(7) RICHARD ZILMER BOARD OF MANAGERS BEG 6/11	5	х						0	91,667	2,367
(8) HERSHEY TRUST COMPANY INSTITUTIONAL TRUSTEE			х					1,000	0	0
(9) GAYLA M BUSH ACTING SEC 911-112 ASST TREASURER/ASST SECRETARY	2 0			х				0	235,949	44,262
(10) MARY LOUISE PORTER ESQ SECRETARY TO 9/11	5 0			х				0	316,086	56,801
(11) VINCENT B RUDISILL TREASURER TO 3/11	2 0			х				0	1,604,091	31,060
(12) DONALD PAPSON EXECUTIVE DIRECTOR	40 0			х				128,139	42,733	26,137
(13) WILLIAM DAVIES TREASURER BEG 3/11	1 0			х				0	307,494	56,825
(14) KENNETH GALL FORMER OFFICER (END 7/09)	0 0						х	0	129,830	40,834
				_						

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (describe	unles an	on (d e tha	n on son er ai	e bo ıs b nd a	x, oth)	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(W- 2/1099-		(F) Estima mount of compens from ganizat relat	ated of other sation the ion and	
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former		MISC)		reiat organiza	
1b	Sub-Total				•	•		<u> </u>					
d	Total (add lines 1b and 1c) .				.			F	129,139	4,479,20	07		417,808
2	Total number of individuals (incl \$100,000 of reportable compen	_				ted	above) who	received more th	aan			
										Г		Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sci				-	ey e	mploy •	ee, d	or highest compen	sated employee	3	Yes	
4	For any individual listed on line organization and related organiz										4	Yes	
5	Did any person listed on line 1a services rendered to the organiz									or individual for •	5		No
Se	ection B. Independent Con												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	n the organizatio											
	Na	(A) me and business ad	dress						Des	(B) cription of services		(C Comper	
100 M	er Hamilton Ilp MARKET STREET ISBURG, PA 17108								legal servic	res			108,572
											\downarrow		
2	Total number of Independent cont	ractors (includir	na but r	not lir	nıted	d to	those	liste	d above) who rece	ıved more than			

\$100,000 of compensation from the organization \blacktriangleright 1

Form 99	•		f Davis					Page 9
Part	/	Statement o	or Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
報告	1a	Federated camp	paigns 1a					
豆豆	ь	Membership du	es 1b	139,498				
ું.લ	c	Fundraising eve	ents 1c					
慧志	d	Related organiz	zations 1d	960,249				
<u>∞</u> [<u>E</u>	e	Government grants	s (contributions) 1e	615,649				
구 교	f	All other contribution	ons, gifts, grants, and 1f	143,075	İ	İ		
ਰ ਦੇ ਕ	g	Noncash contri	butions included in					
Contributions, gifts, grants and other similar amounts		lines 1a-1f \$	3,849					
ပ္ပိုင္	h	Total. Add lines	s 1a-1f	· · · •	1,858,471			
<u> </u>				Business Code				
ELL.	2a	ADMISSIONS		713990	4,409,845	4,409,845		
<u>용</u>	ь	THEATRE COMMUN	NITY RENTAL INCOME	531120	171,358	171,358		
- P	С	THEATRE SERVICE	FEE INCOME	900099	186,991	186,991		
a ≽	d	PROGRAM REVENU AGREEMENTS	JE FROM HE&R	900099	127,647	127,647		
တ	e	OTHER INCOME		900099	297,275	297,275		
<u>ा</u> ब्र	f	All other progra	am service revenue		,	,		
Program Service Revenue								
	g 3		ome (including dividen		5,193,116			
			ar amounts)	· · · · · · · · · · · · · · · · · · ·	943,375	0	-26,431	969,806
	4		stment of tax-exempt bond	<u> </u>	0	0	· ·	
	5	Royalties		▶	0	0		
			(ı) Real	(II) Personal				
	6a	Gross rents	10,000					
	ь	Less rental expenses						
	c	Rental income	10,000					
	d	or (loss) Net rental incoi	me or (loss)		10,000			10,000
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of	20,858,478	2,033				
		assets other than inventory						
	ь	Less cost or	16,083,781					
		other basis and sales expenses						
	С	Gain or (loss)	4,774,697	2,033				
	d o-		s)		4,776,730	0		4,776,730
Other Revenue	8a	Gross income fi events (not incl \$						
ě		See Part IV, lin						
<u>.</u>			а	81,952				
Ě	b		penses b	41,402	40,550			40,550
•	C 9a		(loss) from fundraising rom gaming activities	events	40,330			40,330
		See Part IV, lin						
			а					
	Ь		penses b					
	C 100		(loss) from gaming acti	vities	0			
	10a	Gross sales of returns and allo						
	b		oods sold b					
	С		(loss) from sales of inv		0			
	112	Miscellaneous	s Revenue	Business Code				
	11a							
	b							
	C C	Λ II ο th c						
	d e		ue s 11a-11d					
	[rocan Aud IIIIes	,		О			
	12	Total revenue.	See Instructions .	▶↑	12 022 242	E 102 116	20.424	F 707 000
	<u> </u>			L	12,822,242	5,193,116	-26,431	5,797,086 Form 990 (2011)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

Do no	ot include amounts reported on lines 6b, p, 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 United States See Part IV, line 21		Схрепосо	general expenses	скрепосо
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	155,276	0	155,276	0
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	2,143,768	2,026,504	117,264	0
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	382,775		22,267	0
9	Other employee benefits	214,666	· · · · · ·	34,644	0
10	Payroll taxes	253,547	236,691	<u> </u>	0
11	Fees for services (non-employees)				<u>-</u> _
а	Management	217,704	198,383	19,321	0
b	Legal	167,273	0	 	0
c	Accounting	0			<u>-</u>
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	35,275	0	35,275	0
q	Other	0		,	
12	Advertising and promotion	474,171	471,686	2,485	0
13	Office expenses	48,530	46,165	2,365	0
14	Information technology	44,354	33,313	11,041	0
15	Royalties	0			
16	Occupancy	532,468	532,416	52	0
17	Travel	828	828	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	4,488	4,185	303	0
20	Interest	399,550	399,550	0	0
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	2,076,022	2,072,471	3,551	0
23	Insurance	106,820	96,551	10,269	0
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	COST OF ATTRACTIONS	2,339,760	2,339,760	0	0
b	PROGRAM SUPPLIES	165,780	164,070	1,710	0
c	COLLECTIONS MANAGEMENT	67,253	67,253	0	0
d	CREDIT CARD FEES	58,453	58,453	0	0
е					
f	All other expenses	243,175	236,634	6,541	
25	Total functional expenses. Add lines 1 through 24f	10,131,936	9,525,443	606,493	0
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 96,470 43,462 1 1 2.777.698 4.519.619 2 2 Savings and temporary cash investments 3 429,717 3 215,833 1.637.170 4 2.862.474 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 0 0 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 0 0 6 0 0 7 0 8 128.020 9 9 88.249 Prepaid expenses and deferred charges 10a 32,449,742 Land, buildings, and equipment cost or other basis *Complete* Part VI of Schedule D 10a 23,771,036 **10c** 10b 10,558,567 b Less accumulated depreciation 21,891,175 27,629,968 28,152,621 11 11 2,714,895 790,403 12 12 Investments—other securities See Part IV, line 11 13 13 0 Investments—program-related See Part IV, line 11 . . ol 0 14 14 15 0 15 59,184,974 58,563,836 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 16 377,881 1,108,764 17 17 Accounts payable and accrued expenses . 18 18 19 1,321,214 19 1,689,587 20 ol 20 Ω 21 Escrow or custodial account liability Complete Part IV of Schedule D . . ol 21 0 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 persons Complete Part II of Schedule L \ldots . \ldots . \ldots 22 ol 0 23 Secured mortgages and notes payable to unrelated third parties . . . 23 ol 24 Unsecured notes and loans payable to unrelated third parties 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 18,871,336 25 19,689,451 D 26 20,570,431 26 22,487,802 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 13,611,482 Unrestricted net assets 10,882,208 25.003.061 28 25.193.826 28 Temporarily restricted net assets Fund 29 ol 29 0 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 38.614.543 33 36.076.034 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 59.184.974 34 58.563.836

Pal	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		12,8	322,24
2	Total expenses (must equal Part IX, column (A), line 25)	2			131,93
3	Revenue less expenses Subtract line 2 from line 1	3		2,6	590,30
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		38,6	514,54
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-5,2	228,81
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		36,0	076,03
Par	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	Separate basis Consolidated basis Both consolidated and separated basis			1	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	•	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section

Public Charity Status and Public Support

4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. **Employer identification number**

Name of the organization THE MS HERSHEY FOUNDATION

							23-6242734	
Pai	rt I	Reaso	n for Pu	blic Charity Sta	tus (All organizatio	ns must complete thi	s part.) See ınstru	ctions
The c	rganı	zatıon ıs ı	not a priva	te foundation becaus	eitis (Forlines 1 thi	ough 11, check only one	e box)	
1	Γ	A churc	h, convent	ion of churches, or a	ssociation of churches	section 170(b)(1)(A)(i).	
2	Γ	A schoo	l describe	in section 170(b)(1	.)(A)(ii). (Attach Sch	edule E)		
3	\sqcap	A hospi	tal or a cod	perative hospital se	rvice organization des	cribed in section 170(b)	(1)(A)(iii).	
4	Γ			h organization opera ity, and state	ted in conjunction with	a hospital described in	section 170(b)(1)(A)(iii). Enter the
5	Г	An orga	nızatıon op	erated for the benefi	t of a college or unive	rsity owned or operated b	oy a governmental ur	nit described in
		sect ion	170(b)(1)((A)(iv). (Complete P	art II)			
6	\sqcap	A federa	al, state, or	local government o	governmental unit de	scribed in section 170(b)(1)(A)(v).	
7	Γ	describe	ed in	at normally receives (A)(vi) (Complete P	·	ts support from a govern	imental unit or from t	he general public
8	\sqcap				170(b)(1)(A)(vi) (C	omplete Part II)		
9	ⅳ					% of its support from cor	ntributions, members	hip fees, and gross
	•	=		· ·		ect to certain exceptions	•	
		ıts supp	ort from gr	oss investment inco	me and unrelated busi	ness taxable income (le	ss section 511 tax)	from businesses
		acquire	d by the or	ganızatıon after June	30, 1975 See sectio	n 509(a)(2). (Complete	Part III)	
10	\sqcap					or public safety See sect		
11	Γ	one or n the box	nore public	ly supported organiz	ations described in se orting organization an	enefit of, to perform the f ction 509(a)(1) or secti d complete lines 11e thi III - Functionally integra	on 509(a)(2) See se rough 11h	, , ,
e	Γ	other th				ntrolled directly or indire publicly supported organi		
f			ganızation	received a written d	etermination from the	IRS that it is a Type I, T	ype II or Type III s	upporting organization,
g					zation accepted any g	lift or contribution from a	iny of the	
			g persons?		antrole author along a	r togothor with porcons	docaribod in (ii)	V N-
						r together with persons (described iii (ii)	Yes No
			· ·		ie the supported organ	lization?		
		` '	•	er of a person descri	` ') abovo?		11g(ii)
L					n described in (i) or (ii			11g(iii)
h		Piovide	the followi	ng mormation about	the supported organiz	acion(S)		
				(iii)	(iv)			

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizat col (i) lis your gove docume	e Ion In ted In Frning	(v) Did you not organizat col (i) of suppor	on in your	(vi) Is the organizati col (i) orga in the U	on in anized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su			1		Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶ □
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	•			iow, piease cor		
	ndar year (or fiscal year beginning	(-) 2007	(h) 2000	(=) 2000	(4) 2010	(-) 2011	(6) Tatal
	ın)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not	485,587	6,730,327	1,603,659	3,348,260	1,940,423	14,108,256
	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in	F 607 F06	5 604 407	2 672 057	6 500 077	5 400 400	25 726 255
	any activity that is related to the	5,637,596	5,634,437	2,672,057	6,599,077	5,193,188	25,736,355
	organization's tax-exempt						
_	purpose						
3	Gross receipts from activities that are not an unrelated trade or						
4	business under section 513 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						
6	charge Total. Add lines 1 through 5	6,123,183	12,364,764	4,275,716	9,947,337	7,133,611	39,844,611
	Amounts included on lines 1, 2,	0,123,103	12,301,701	1,273,710	3,317,337	7,133,011	33,011,011
, u	and 3 received from disqualified	2,143,794	1,216,036	132,903	2,432,599	960,249	6,885,581
	persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
C	Add lines 7a and 7b	2,143,794	1,216,036	132,903	2,432,599	960,249	6,885,581
8	Public Support (Subtract line 7c						32,959,030
	from line 6) ection B. Total Support						
	ndar year (or fiscal year beginning						
04.0	in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	A mounts from line 6	6,123,183	12,364,764	4,275,716	9,947,337	7,133,611	39,844,611
10a	Gross income from interest,						
	dividends, payments received	813,389	720,883	312,030	840,028	953,375	3,639,705
	on securities loans, rents, royalties and income from	013,309	720,003	312,030	040,020	933,373	3,039,703
	similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes)						
	from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	813,389	720,883	312,030	840,028	953,375	3,639,705
11	Net income from unrelated	,	·	,		,	<u> </u>
	business activities not included						
	in line 10b, whether or not the						
12	business is regularly carried on Other income Do not include						
12	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c, 11 and 12)	6,936,572	13,085,647	4,587,746	10,787,365	8,086,986	43,484,316
14	First Five Years If the Form 990 is for	or the organizati	on's first, second,	thırd, fourth, or fi	fth tax vear as a	501(c)(3) organiz	zation.
	check this box and stop here	J		, ,	,	. , , , ,	É
	ction C. Computation of Publ			4.2 1 (6)			
15	Public Support Percentage for 2011	•		13 column (f))		15	75 795 %
16	Public support percentage from 201	0 Schedule A, P	art III, line 15			16	76 747 %
	ction D. Computation of Inve				(5))	T T	
17	Investment income percentage for 2	•			(٢))	17	8 370 %
18	Investment income percentage from					18	8 572 %
19a	33 1/3% support tests—2011. If the						
L	more than 33 1/3%, check this box a 33 1/3% support tests—2010. If the						▶ ▼
Ь	18 is not more than 33 1/3%, check						

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV	Supplemental Information. 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. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

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Open to Public

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Inspection

	me of the organization EMS HERSHEY FOUNDATION			Empl	oyer identifica	ition numbe	er
_				23-6	242734		
Pa	organizations Maintaining Donor Ad organization answered "Yes" to Form 990		Similar Fur			<u> </u>	
		(a) Donor advised fur	nds	(b) Funds and c	ther accou	nts
L	Total number at end of year						
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)						
1	Aggregate value at end of year						
5	Did the organization inform all donors and donor advise funds are the organization's property, subject to the o	_		advis	ed	┌ Yes	┌ No
5	Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bene conferring impermissible private benefit					┌ Yes	┌ No
Рa	rt II Conservation Easements. Complete	f the organization answer	ed "Yes" to	Form	990, Part I\	/, line 7.	
L 2	Purpose(s) of conservation easements held by the organization of land for public use (e.g., recreation of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualif	n or pleasure)	vation of an h	rtıfıed	cally important historic struc nservation	=	a
	easement on the last day of the tax year			Т			
	Total number of concernation accoments		<u> </u>	2	Held at the	Ena or the	Year
а	Total number of conservation easements		—	2a			
Ь	Total acreage restricted by conservation easements		<u> </u>	2b			
С	Number of conservation easements on a certified hist	, ,	—	2c			
d	Number of conservation easements included in (c) ac	quired after 8/17/06		2d			
3 4	Number of conservation easements modified, transfer the taxable year - Number of states where property subject to conserva			•	J	J	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, insp	ection, handli	ng of	violations, and	│ ├─ Yes	┌ No
5	Staff and volunteer hours devoted to monitoring, inspe	ecting and enforcing conserva	atıon easemeı	nts du	ring the year l	<u> </u>	
7	A mount of expenses incurred in monitoring, inspectin \$\blue\$ \$	g, and enforcing conservatior	n easements (during	the year		
3	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	(d) above satisfy the requiren	nents of secti	on		┌ Yes	┌ No
9	In Part XIV, describe how the organization reports co balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easem	ne footnote to the organization					
ar	t III Organizations Maintaining Collection Complete if the organization answered "	ns of Art, Historical Tre		r Oth	er Similar	Assets.	
La	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held in provide, in Part XIV, the text of the footnote to its final	116, not to report in its rever or public exhibition, educatio	nue statement on or research	ın fur			≘,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for p provide the following amounts relating to these items						
	(i) Revenues included in Form 990, Part VIII, line 1				► \$		
	(ii) Assets included in Form 990, Part X						
,	If the organization received or held works of art, histo	rical treasures or other simil	lar assets for	financ			
2	following amounts required to be reported under SFAS		433613 101	manc		ac tile	
а	Revenues included in Form 990, Part VIII, line 1				► \$		

b Assets included in Form 990, Part X

Part	••• Organizations Maintaining Co	llections of Art	<u>, His</u>	toric	al Tre	easures, or O	<u>the</u>	<u>r Similar Asse</u>	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	ne follo	wing th	nat are a significa	ant u	se of its collectio	n	
а	Public exhibition		d	Γ	Loan o	r exchange progi	ams			
b	Scholarly research		e	Γ	Other					
c	✓ Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ın hov	v they	further	the organization	's ex	cempt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than to								Yes	√ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar						d "Y	es" to Form 99	0,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interme	ediary	for co	ntrıbut	ions or other ass	ets		Yes	√ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng ta	ble	Г		A mo		
_	Darwaya balanca					-	1.0	Amo	unt	
c d	Beginning balance						1c 1d			
	Additions during the year									
e f	Distributions during the year						1e 1f			
f	Ending balance	000 5 111				L	TL	_		
2a	Did the organization include an amount on Fo	•	e 21?					ı	Yes	│ No
	If "Yes," explain the arrangement in Part XI\				1 1157	" 000				
Pa	rt V Endowment Funds. Complete	if the organization (a)Current Year		Were Prior Ye		to Form 990, (c)Two Years Back		t IV, line 10.)Three Years Back (ω\ Εουτ V	'ears Back
1a	Beginning of year balance	25,003,061	(6)		949,743	20,214,18	-	28,927,435	e)i oui i	ears back
b	Contributions	25,910		,	34,320	1,686,45	_	, ,		
c	Investment earnings or losses	173,169		3,0	036,666	1,712,89	_	-3,996,038		
d	Grants or scholarships	,				· ,		, ,		
e	Other expenditures for facilities and programs	8,314			17,668	1,663,78	8	4,717,209		
f	Administrative expenses									
g	End of year balance	25,193,826		25,0	003,061	21,949,74	3	20,214,188		
2	Provide the estimated percentage of the year	r end balance held a	as				<u> </u>			
а	Board designated or quasi-endowment									
b	Permanent endowment ►									
С	Term endowment ▶ 100 000 %									
3a	Are there endowment funds not in the posse	ssion of the organiza	atıon t	that ai	re held	and administere	d for	the		
	organization by								Yes	No
	(i) unrelated organizations							3a(i)		No
	(ii) related organizations						•	3a(ii)	Yes	
	If "Yes" to 3a(II), are the related organizatio	•					•	3b	Yes	
4	Describe in Part XIV the intended uses of th									
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa	irt X,	line 10	<u>0.</u>				
	Description of property				Cost or o			(c) Accumulated depreciation	(d) Bo	ok value
1a	Land		•			1	,000			1,000
b I	Buildings					21,972	,531	4,128,170	1	7,844,361
c I	Leasehold improvements					8,002	,641	4,751,793		3,250,848
d I	Equipment					2,351	,385	1,608,656		742,729
_e (Other	<u> </u>				122	,184	69,947		52,237
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colur	nn (B)	, line :	10(c).)				2	1,891,175
								Schedule D (Form 9	90) 2011

Part VII Investments—Other Securities. See	Form 990, Part X, line 1		
(a) Description of security or category (including name of security)	(b) Book value		od of valuation f-year market value
(1)Financial derivatives			,
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Se		<u> </u> 13	
			od of valuation
(a) Description of investment type	(b) Book value		f-year market value
	•		
Part IX Other Assets. See Form 990, Part X, II (a) Descri			(b) Book value
(u) Desert	ption		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15.)		
Part X Other Liabilities. See Form 990, Part 3	X, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	0		
ACCRUED POST RETIREMENT BEN OB	3,984,147		
LOAN GUARANTEE OBLIGATION	14,190,915		
INTEREST RATE SWAP LIABILITY	1,514,389		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	10.600.451		
	19,689,451	<u> </u>	

	dule D (Form 990) 2011 TXI Reconciliation of C	Change in Net Assets from Fo	rm 990 to Financial Stateme	nts	Page 4
1	Total revenue (Form 990, Part	: VIII, column (A), line 12)		1	12,822,242
2 3	Total expenses (Form 990, Pa			2	10,131,936
4	Excess or (deficit) for the year Net unrealized gains (losses)			3	-4,224,018
5	Donated services and use of fa			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	-1,004,797
9	Total adjustments (net) Add I			9	-5,228,815
10 Pari		perfinancial statements Combine lin Revenue per Audited Financia		10 per Ro	-2,538,509 eturn
1		er support per audited financial staten	-	1	8,639,626
2	Amounts included on line 1 b	ut not on Form 990, Part VIII, line 12			
а	-	tments	2a -4,224,018		
b		facilities	. 2b		
c d	Recoveries of prior year gran Other (Describe in Part XIV)		. 2c		
e	Add lines 2a through 2d			2e	-4,224,018
3	Subtract line 2e from line 1 .			3	12,863,644
4		90, Part VIII, line 12, but not on line 1	1 1		
a	·	luded on Form 990, Part VIII, line 7b			
b c	Other (Describe in Part XIV) Add lines 4a and 4b		-41,402	4c	-41,402
5		nd 4c. (This should equal Form 990, Pa	art I, line 12)	5	12,822,242
		xpenses per Audited Financi		per	
1	Total expenses and losses pe	er audited financial		1	11,178,135
2		ut not on Form 990, Part IX, line 25			
а	Donated services and use of	facilities	2a		
b	Prior year adjustments		2b		
с	Other losses		. 2c	-	
d e	Other (Describe in Part XIV) Add lines 2a through 2d		2d 1,046,199	2e	1,046,199
3	Subtract line 2e from line 1 .			3	10,131,936
4	Amounts included on Form 99	00, Part IX, line 25, but not on line 1:			, ,
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)		4b		
с 5	Add lines 4a and 4b	nd 4c. (This should equal Form 990, P		4c 5	10 121 026
	t XIV Supplemental In	<u> </u>	arti, iiile 18)		10,131,936
	nplete this part to provide the de	escriptions required for Part II, lines 3			
	t V , line 4 , Part X , Part XI , line 8 itional information	3, Part XII, lines 2d and 4b, and Part >	(III, lines 2d and 4b Also complete	this pa	rt to provide any
	Identifier	Return Reference	Explanat	ion	
Sche	dule D, Part III, Line 1a		Museum Collections The Museum's		
			historical items used as a means to lives of America's earliest inhabita		
			Hershey, and the Hershey commun		
			cataloged, preserved, and cared for to expense collections when they a	The F	
			cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo	The Fre acqu rical T	uired Schedule D, Part reasures, and Other
			cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey F includes the following (1) artifacts	The Fre acquirical Toundate and his	uired Schedule D, Part reasures, and Other tion's collection storical oral and
			cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey F	The Fre acquirical Toundate and his and his and less than the second terms of the seco	uired Schedule D, Part reasures, and Other tion's collection storical oral and egacy of Milton S
			cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey Fincludes the following (1) artifacts written documents related to the lift Hershey from his personal life to his philanthropies (2) artifacts and hist	The Fre acquirical Toundate and his and list warious corical	uired Schedule D, Part reasures, and Other cion's collection storical oral and egacy of Milton S us businesses to his oral and written
			cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey Fincludes the following (1) artifacts written documents related to the lift Hershey from his personal life to his philanthropies (2) artifacts and hist documents related to the communit that document Pennsylvania Germa	The Free acquerical Toundate and his eand less various corical cy of He	uired Schedule D, Part reasures, and Other cion's collection storical oral and egacy of Milton S us businesses to his oral and written ershey (3) artifacts ure (4) ethnographic
			cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey Fincludes the following (1) artifacts written documents related to the lift Hershey from his personal life to his philanthropies (2) artifacts and hist documents related to the communit that document Pennsylvania Germa materials related to indigenous peo	The Free acquirical Toundate and his various corical sy of Herin cultiple of the fire acquiring the fire acquiring the fire acquiring the acqu	urred Schedule D, Part reasures, and Other con's collection storical oral and egacy of Milton S us businesses to his oral and written ershey (3) artifacts ure (4) ethnographic the United States (5)
			cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey Fincludes the following (1) artifacts written documents related to the lift Hershey from his personal life to his philanthropies (2) artifacts and hist documents related to the communit that document Pennsylvania Germa materials related to indigenous peo plantings at the Hershey Garden T M S Hershey Foundation's exempt	The Free acquirical Toundate and his and los varios corical by of He abo purpos	urred Schedule D, Part reasures, and Other con's collection storical oral and egacy of Milton S us businesses to his oral and written ershey (3) artifacts ure (4) ethnographic the United States (5) ve collections further se of education and
			cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey Fincludes the following (1) artifacts written documents related to the lift Hershey from his personal life to his philanthropies (2) artifacts and hist documents related to the communit that document Pennsylvania Germa materials related to indigenous peo plantings at the Hershey Garden T	The Free acquirical Toundate and his eard for correct for culting ple of the about purposs of the softh.	uired Schedule D, Part reasures, and Other con's collection storical oral and egacy of Milton S us businesses to his oral and written ershey (3) artifacts ure (4) ethnographic the United States (5) ve collections further se of education and e Hershey area by
			cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey Fincludes the following (1) artifacts written documents related to the lift Hershey from his personal life to his philanthropies (2) artifacts and hist documents related to the communit that document Pennsylvania Germa materials related to indigenous peo plantings at the Hershey Garden TM S Hershey Foundation's exempt cultural enrichment for the resident being displayed in an accessible puand gardens	The Free acquirical Toundate and his various orical sy of Honor allowed purposes of the blic m	uired Schedule D, Part reasures, and Other con's collection storical oral and egacy of Milton S us businesses to his oral and written ershey (3) artifacts ure (4) ethnographic the United States (5) ve collections further se of education and e Hershey area by useum, public archive
Б СНЕ	EDULE D, PART V, LINE 4	INTENDED USES OF THE ORGANIZATION'S ENDOWMENT	cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey Fincludes the following (1) artifacts written documents related to the lift Hershey from his personal life to his philanthropies (2) artifacts and hist documents related to the communit that document Pennsylvania Germa materials related to indigenous peo plantings at the Hershey Garden T M S Hershey Foundation's exempt cultural enrichment for the resident being displayed in an accessible put	The Free acquirical Toundate and his e and los various or calling of the about purposes of the blic m	uired Schedule D, Part reasures, and Other cion's collection storical oral and egacy of Milton S us businesses to his oral and written ershey (3) artifacts ure (4) ethnographic the United States (5) ve collections further se of education and e Hershey area by useum, public archive
6 СНВ	EDULE D, PART V, LINE 4		cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey Fincludes the following (1) artifacts written documents related to the lift Hershey from his personal life to his philanthropies (2) artifacts and hist documents related to the communit that document Pennsylvania Germa materials related to indigenous peo plantings at the Hershey Garden TM S Hershey Foundation's exempt cultural enrichment for the resident being displayed in an accessible puland gardens MILTON S HERSHEY MADE HIS GFOUNDATION ON DECEMBER 5, OF CREATING AND ENDOWING I	The Free acquirical Toundate and his eard los varios for call to purpose of the blic m	uired Schedule D, Part reasures, and Other cion's collection storical oral and egacy of Milton S us businesses to his oral and written ershey (3) artifacts ure (4) ethnographic the United States (5) ve collections further se of education and e Hershey area by useum, public archive O THE M S HERSHEY WITH THE PURPOSE PETUITY THIS
SCHE	EDULE D, PART V, LINE 4	ORGANIZATION'S ENDOWMENT	cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey Fincludes the following (1) artifacts written documents related to the lift Hershey from his personal life to his philanthropies (2) artifacts and hist documents related to the communit that document Pennsylvania Germa materials related to indigenous peo plantings at the Hershey Garden T M S Hershey Foundation's exempt cultural enrichment for the resident being displayed in an accessible puland gardens MILTON S HERSHEY MADE HIS GFOUNDATION ON DECEMBER 5, OF CREATING AND ENDOWING I FOUNDATION FOR EDUCATIONA WAS FUNDED FOR SEVERAL USE	The Free acquirical Toundate and his eand list orical sy of Holin cultiple of the about purposes of the blic m GIFT T 1935 N N PER AL PUF S, INT	uired Schedule D, Part reasures, and Other cion's collection storical oral and egacy of Milton S us businesses to his oral and written ershey (3) artifacts ure (4) ethnographic the United States (5) ve collections further se of education and e Hershey area by useum, public archive O THE M S HERSHEY WITH THE PURPOSE PETUITY THIS RPOSES THE TRUST ENTS AND
SCHE	EDULE D, PART V, LINE 4	ORGANIZATION'S ENDOWMENT	cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey Fincludes the following (1) artifacts written documents related to the lift Hershey from his personal life to his philanthropies (2) artifacts and hist documents related to the communit that document Pennsylvania Germa materials related to indigenous peo plantings at the Hershey Garden TM S Hershey Foundation's exempt cultural enrichment for the resident being displayed in an accessible puland gardens MILTON S HERSHEY MADE HIS GFOUNDATION ON DECEMBER 5, OF CREATING AND ENDOWING IFOUNDATION FOR EDUCATION	The Free acquirical Toundate and his e and list or correctly of Holin cultiple of the about purposes of the blic m GIFT T 1935 N PER L PUFS, INT	uired Schedule D, Part reasures, and Other cion's collection storical oral and egacy of Milton S us businesses to his oral and written ershey (3) artifacts ure (4) ethnographic the United States (5) ve collections further se of education and e Hershey area by useum, public archive O THE M S HERSHEY WITH THE PURPOSE PETUITY THIS RPOSES THE TRUST ENTS AND ESTABLISHMENT
SCHE	EDULE D, PART V, LINE 4	ORGANIZATION'S ENDOWMENT	cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey Fincludes the following (1) artifacts written documents related to the lift Hershey from his personal life to his philanthropies (2) artifacts and hist documents related to the communit that document Pennsylvania Germa materials related to indigenous peo plantings at the Hershey Garden T M S Hershey Foundation's exempt cultural enrichment for the resident being displayed in an accessible puland gardens MILTON S HERSHEY MADE HIS OF CREATING AND ENDOWING I FOUNDATION ON DECEMBER 5, OF CREATING AND ENDOWING I FOUNDATION FOR EDUCATIONAL WAS FUNDED FOR SEVERAL USE PURPOSES AS FOLLOWS (1) FOR AND MAINTENANCE IN WHOLE OF MORE EDUCATIONAL INSTITUTE.	The Free acquirical Toundate and his eand less various for culting the about purposes of the blic management of the about purposes of the blic management of the about purposes of the blic management of the about purposes of the blic management of the b	uired Schedule D, Part reasures, and Other cion's collection storical oral and egacy of Milton S us businesses to his oral and written ershey (3) artifacts ure (4) ethnographic the United States (5) ve collections further se of education and e Hershey area by useum, public archive O THE M S HERSHEY WITH THE PURPOSE PETUITY THIS RPOSES THE TRUST ENTS AND ESTABLISHMENT PART OF ONE OR IN DERRY
GCHE	EDULE D, PART V, LINE 4	ORGANIZATION'S ENDOWMENT	cataloged, preserved, and cared for to expense collections when they a III, Line 4 Collections of Art, Histo Similar Assets The M S Hershey Fincludes the following (1) artifacts written documents related to the lift Hershey from his personal life to his philanthropies (2) artifacts and hist documents related to the communit that document Pennsylvania Germa materials related to indigenous peo plantings at the Hershey Garden T M S Hershey Foundation's exempt cultural enrichment for the resident being displayed in an accessible puland gardens MILTON S HERSHEY MADE HIS GFOUNDATION ON DECEMBER 5, OF CREATING AND ENDOWING I FOUNDATION FOR EDUCATIONAL WAS FUNDED FOR SEVERAL USE PURPOSES AS FOLLOWS (1) FOR AND MAINTENANCE IN WHOLE CMORE EDUCATIONAL INSTITUT TO WNSHIP, PENNSYLVANIA, AN PUBLIC SCHOOLS OF DERRY TO	The Free acquirical Toundate and his eand less various for call to the about purposes of	uired Schedule D, Part reasures, and Other cion's collection storical oral and egacy of Milton S us businesses to his oral and written ershey (3) artifacts ure (4) ethnographic the United States (5) ve collections further se of education and e Hershey area by useum, public archive O THE M S HERSHEY WITH THE PURPOSE PETUITY THIS RPOSES THE TRUST ENTS AND ESTABLISHMENT PART OF ONE OR IN DERRY (2) THE SUPPORT OF IP AND THE
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OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Supplemental Information Regarding

Fundraising or Gaming Activities

Open to Public

				•			Inspection
ame of the organization		<u></u>			E	mployer ider	ntification number
HE MS HERSHEY FOUNDATION	ON				,	3-6242734	
Date Fundanising Asi	tivities Complet	o if the e	#62 PIZ2	tion answard "Vos"			
Part I Fundraising Act	tivities. Complet	e ir the o	rganiza	tion answered Yes	to Form 9	90, Part IV	, line 17.
Indicate whether the organ	nization raised funds	through a	ny of the	following activities Ch	eck all that	apply	
Mail solicitations			е	Solicitation of noi	n-governme	nt grants	
b Γ Internet and e-mail so	olicitations		f	Solicitation of go	vernment gr	ants	
c Γ Phone solicitations			g	Special fundraisir	ng events		
d	s						
a Did the organization have or key employees listed in							Г _{Yes} Г м
b If "Yes," list the ten highes to be compensated at leas							
(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	contrib	er have dy or rol of utions?	(iv) Gross receipts from activity	(or reta fundraise	int paid to ined by) ir listed in (i)	(vi) A mount paid to (or retained by) organization
		Yes	No				
tal							
List all states in which the licensing	organization is regi	stered or l	icensed t	l to solicit funds or has b	I een notified	ıt ıs exempt	I from registration or

Pai	rt II	Fundraising Events. Commore than \$15,000 on Form				
			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through
			Bynd Footlights (event type)	Cultural Exprs (event type)	(total number)	col (c))
E.	1	Gross receipts	40,197	23,125	18,630	81,952
Revenue	2	Less Charitable				
<u>~</u>	3	Gross income (line 1 minus line 2)	40,197	23,125	18,630	81,952
	4	Cash prizes				
မွာ	5	Non-cash prizes				
Expenses	6	Rent/facility costs				
	7	Food and beverages				
Direct	8	Entertainment				
Ξ	9	Other direct expenses .	11,392	20,069	9,941	41,402
	10	Direct expense summary Add line	es 4 through 9 in column	(d)		(41,402)
	11	Net income summary Combine lir	nes 3 and 10 in column (d)		40,550
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lin		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Reveilde			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1 .	Gross revenue				
မှ	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
D Leg	5	Other direct expenses				
	6	Volunteer labor	Г Yes	Г Yes	Г Yes Г No	
	7	Direct expense summary Add lines	s 2 through 5 in column (d)	•	()
	8	Net gaming income summary Coml	bine lines 1 and 7 in colu	mn (d)	<u> ▶ .</u>	
9 a b	Is th	er the state(s) in which the organiza he organization licensed to operate No," Explain	gaming activities in each	n of these states?		· Fyes FNo
l0a b	Were	e any of the organization's gaming l	ıcenses revoked, suspen	ded or terminated during	the tax year?	

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity		
	formed to administer charitable (gamıng?		· · · · F Yes F	- No
13	Indicate the percentage of gamii	ag activity operated in		1 1	
a				13a	
b					
14		f the person who prepares the organiza			
	Name ►				
	Address ►				
	revenue?	ntract with a third party from whom the			- No
		ed by the third party 🟲 \$			
С	If "Yes," enter name and address	S			
	Name 🟲				
	Address ►				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation I	\$ \$			
	Description of services provided	>			
17 a		Employee er state law to make charitable distribu		· · ·	- No
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-
_		activities during the tax year > \$		hadala C /	
Par	t IV Complete this part to proceed instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see	
	Identifier	ReturnReference	Explana	tion	
		•	•		

DLN: 93493319020802

OMB No 1545-0047

Schedule J

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization THE MS HERSHEY FOUNDATION

(Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

23-6242734

Pai	rt I Questions Regarding Compensation	on			
				Yes	No
1a		rovided any of the following to or for a person listed in Form II 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 idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b		organization follow a written policy regarding payment or scribed 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?				
3	Indicate which, if any, of the following the organization organization or Check all	that apply			
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	, Part VII, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	Yes	
c	Participate in, or receive payment from, an equity-	-based compensation arrangement?	4c	Yes	
	If "Yes" to any of lines $4a-c$, list the persons and p	provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only m	nust complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a, did the organization pay or accrue any			
a	The organization?		5a		No
b	Any related organization?		5b		No
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of \ensuremath{N}	A, line 1a, did the organization pay or accrue any			
а	The organization?		6a		Νo
b	Any related organization?		6b		No
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"	A , line 1a , did the organization provide any non-fixed " describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII,				
	subject to the initial contract exception described in Part III	in Regs section 53 4958-4(a)(3)? If "Yes," describe	8		No
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	the rebuttable presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) 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
(1) GAYLA M BUSH ACTING SEC 911-1	(ı) (ıı)	0 164,005	0 69,651	0 2,293	0 35,168	0 9,094	0 280,211	(
(2) KENNETH GALL	(ı) (ıı)	0 107,726	0 21,600	0 504	0 19,926	0 20,908	0 170,664	(
(3) MARY LOUISE PORTER ESQ	(ı) (ıı)	0 199,075	0 116,000	0 1,011	0 29,952	0 26,849	0 372,887	(
(4) VINCENT B RUDISILL	(ı) (ıı)	0 209,202	0 1,375,388	0 19,501	0 22,152	0 8 ,9 0 8	0 1,635,151	(
(5) JAMES M MEAD	(ı) (ıı)	0 175,847	0 0	0	0 81,099	0 2,367	0 259,313	(
(6) LEROY S ZIMMERMAN	(ı) (ıı)	0 256,779	0 40,000	0 992,437	0 39,231	0 17,442	0 1,345,889	766,726
(7) DONALD PAPSON	(ı) (ıı)	128,139 42,733	0 0	0 0	9,100 0	17,037 0	154,276 42,733	
(8) WILLIAM DAVIES	(I) (II)	0 243,298	0 62,809	0 1,387	0 36,750	0 20,075	0 364,319	C

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

Identifier	Return Reference	Explanation
PART I,	NONQUALIFIED RETIREMENT PLAN	DOMALD PAPSOR RETIRED FROM THE HERSHEY COMPANY PRIDATO HIS EMPLOYMENT WITH THE MS HERSHEY FOUNDATION INCLUDED IN HIS COMPENSATION ARE PAYMENTS MADE BY THE HERSHEY COMPANY FOR DEFERRED COMPENSATION ON BE OF THE PAYMENTS WERE MADE BY THE MS HERSHEY FOUNDATION AND DID NOT RELATE TO HIS SERVICE FOR THE FOUNDATION SCHOOL PAYMENTS WERE MADE BY THE MS HERSHEY FOUNDATION ARRANGEMENT DONALD PAPSON RETIRED FROM THE HERSHEY COMPANY PRIOR TO HIS EMPLOYMENT WITH THE MS HERSHEY FOUNDATION INCLUDED IN HIS COMPENSATION ARE PAYMENTS MADE BY THE HERSHEY COMPANY FOR THE EXERCISION OF STOCK OF OTTIONS NONE OF THE PAYMENTS WERE MADE BY THE MS HERSHEY FOUNDATION AND DID NOT RELATE TO HIS SERVICE FOR THE FOUNDATION PART VIJOSCHEDULE J REPORTABLE COMPENSATION THE MS HERSHEY FOUNDATION AND DID NOT RELATE TO HIS SERVICE FOR THE FOUNDATION PART VIJOSCHEDULE J REPORTABLE COMPENSATION THE MS HERSHEY FOUNDATION AND DID NOT RELATE TO HIS SERVICE FOR THE FOUNDATION PART VIJOSCHEDULE J REPORTABLE COMPENSATION THE MS HERSHEY FOUNDATION AND DID NOT RELATE TO HIS SERVICE FOR THE FOUNDATION PART VIJOSCHEDULE J REPORTABLE COMPENSATION THE MS HERSHEY FOUNDATION AND DID NOT RELATE TO HIS SERVICE FOR THE FOUNDATION PART VIJOSCHEDULE J REPORTABLE COMPENSATION THE MS HERSHEY FOUNDATION AND DID NOT RELATE TO HIS SERVICE FOR THE FOUNDATION PART VIJOSCHEDULE J REPORTABLE COMPENSATION THE MS HERSHEY FOUNDATION AND THE WIND PART VIJOSCHEDULE J REPORTABLE OF THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATION AND THE WIND HERSHEY FOUNDATI
VII	RELATED	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 MILTON HERSHEY HERSHEY ENTERTNMNT HERSHEY SCHOOL & RESORTS CO SCHOOL TRUST RAYMOND GOVER 4 3 JAMES SHEEHAN 6 5 JAMES MEAD - 3 6 5 8 VELMA REDMOND 8 6 LEROY ZIMMERMAN 2 0 1 8 6 5 RICHARD ZILMER 6 6 GAYLA BUSH 53 WILLIAM DAVIES 45 KENNETH GALL 55 VINCENT RUDISILL 39 MARY LOUISE PORTER 50 NOTE Time spent on Hershey Trust Company matters is included in the Milton Hershey School & School Trust average hours worked per week
FORM 990, PART VII/SCHEDULE J		THE RELATED ORGANIZATIONS PROVIDE THE FOUNDATION WITH ALL PERTINENT PAYROLL INFORMATION REQUIRED TO COMPLETE PART VII AND SCHEDULE J OF THE FORM 990

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DLN: 93493319020802

OMB No 1545-0047

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SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization **Employer identification number** THE MS HERSHEY FOUNDATION

De	Tunes of Duescuty				23-6242734			
Ра	Types of Property	(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line	Method of c contributio	letermı		
1	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
4	Books and publications							
	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .							
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
L6	Real estate—Commercial							
	Real estate—O ther							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy			_				
	Historical artifacts	X	88	0				
	Scientific specimens							
	Archeological artifacts Other ▶ (Chocolate)	<u> </u>	1	820	FMV			
25	Auction			020	1111			
26	Other ► (Passes/Certificates)	X	65	16,480	FMV			
27	Other ► (Tools/Bulbs)	Х	13	15,233	FMV			
28	Other ▶ (<u>Breakfast</u>)	Х	1	5,913	FMV			
	Cultural	,	_					
	Other ► (Expressions)	X	1	2,925	FMV			
	Exhibit and web page set							
	Other ► (<u>up</u>)	Х	2	750	FMV			
	History							
	contest	l x	,	1,728	EM\/			
29	Other ► (prizes) Number of Forms 8283 received		anization during the tay ve	•				
	for which the organization compl				29			
							Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
b	If "Yes," describe the arrangem	ent in Part i	II					
31	Does the organization have a gif	t acceptan	ce policy that requires the	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e thırd part	ies or related organizations	to solicit, process, or sell i	non-cash			
						32a		No
	If "Yes," describe in Part II		un anluman /-> f-u turin - f	wa wa whee face wheels are become of				
33	If the organization did not report describe in Part II	. revenues	in column (c) for a type of p	roperty for which column (a	ı) is cnecked,			
	GCSCHDC III I GILLI							

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2011

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DLN: 93493319020802

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public

Inspection

Name of the organization THE MS HERSHEY FOUNDATION	Employer identifi	cation number
	23-6242734	

ldentifier	Return Reference	Explanation
FORM 990, PART I, LINE 6	SUMMARY SECTION	Volunteers are a vital part of the MS 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

Identifier	Return Reference	Explanation
FORM 990, PART III, LINE 4A-D	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	Program Service Accomplishment # 1 Completed during Milton Hersheys Great Building Campaign program in the 1930s, the new Community Center Building housed Hershey Theatre, which first opened as a vaudeville and movie house. Today, the Theatre is the area's premier performing arts center. Presenting touring Broadway shows, classical music, dance attractions and world-renow ned entertainers, the Theatres rich history and performing arts presentations provide cultural and educational enrichment to patrons of all ages. Developed in 2008, The Hershey Theatre Apollo Awards is a scholarship program which recognizes excellence in local high school theater productions. All Derry Township School District students may participate in field trips to the Hershey. Theatre at no charge. Number Benefitted 116,100 Expenses \$5,095,577 Revenue. \$3,959,803. Program Service Accomplishment #2. The Hershey Story, The Museum on Chocolate Avenue opened in 2009. The Museum Experience is an educational, interactive permanent exhibit space that shares the stories of Milton S. Hershey, his businesses, philanthropies and community. The Apprentice Program is an activity designed to further engage children as they explore the exhibits in the Chocolate. Lab, guests learn about the origins of chocolate and participate in hands-on activities using chocolate. In the coming year, planned special exhibits highlight the Native American and Pennsylvania German collections, originally purchased by Milton Hershey. School field trips, homeschool and summer camp programs all meet PA state academic standards. All Derry Township School District students may participate in field trips to the Museum Experience at no charge. Number Benefitted 119,000 Expenses. \$3,688,879 Revenue. \$1,157,558 Program Service Accomplishment #3. Hershey Gardens was originally developed in 1937 at Milton Hersheys request. It has since expanded and now features 23 acres of seasonal displays and rare trees within 11 theme gardens. The Childrens Garden and Butterfly House offer childr

ldentifier	Return Reference	Explanation
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

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 3	GOVERNING BODY & MANAGEMENT	The MS 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 MS. Hershey Foundation in order to enhance Foundation operations and further its tax-exempt mission, the MS. Hershey Foundation entered into a contract with HE&R to provide various services including the following. 1. Wedding, party and event caterings 2. Retail operations support 3. Theatre Operations management 4. IT, communications and security services. Prior to the commencement of services, the MS. 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 MS 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 MS. Hershey Foundation to continue using the services of

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	FORM 990 REVIEW PROCESS	The Form 990 is prepared under the direction of the Director of Finance of the MS. Hershey Foundation. The Form 990 is reviewed by the Executive Director of the MS. Hershey Foundation, outside counsel and its independent tax advisors who sign the return as "paid preparers." The board of managers of the MS. Hershey Foundation reviews and discusses the Form 990 at one of its scheduled meetings prior to filing the return with the Internal Revenue Service, noting key disclosures.

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST	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. Both, the M.S. Hershey Foundation and the Hershey Trust Company, trustee for the M.S. HERSHEY FOUNDATION, have 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, Officers and key employees is documented in the "Conflict of Interest" section of the Governance Guidelines for the M.S. Hershey Foundation. Additionally, the conflict of interest policy covering Managers, Officers and key employees is documented in "Ethical Standards" and "Conflict of Interest" and "Code of Conduct" sections of the Policy Manual for the Hershey Trust. Company Each 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, Officer and key employee is required 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 related to managers, officers and key employees are brought to the attention of the Chairperson OF THE BOARD OF MA

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINES 15A AND 15B	COMPENSATION PROCESS	The MS Hershey Foundation's board of managers (the governing body of the MS 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 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 Article 14, 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 Hershey Trust Company, the statutory officers, the Chief Executive Officer and Compliance Officer is fixed by the Board of Directors of Hershey Trust Company in accordance with Section 5 of its bylaws. The CEO of Hershey Trust Company approves compensation

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	PUBLIC AVAILABILITY OF DOCUMENTS	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.

ldentifier	Return Reference	Explanation
FORM 990, PART	RECONCILIATION OF	INCREASE IN UNRECOGNIZED BENEFIT COST \$ (231,269) INCREASE IN INTEREST RATE SWAP
XI, LINE 5	NET ASSETS	LIABILITY (773,528) UNREALIZED LOSSES ON INVESTMENTS (4,224,018) \$(5,228,815)

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

DLN: 93493319020802

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2011

Schedule R (Form 990) 2011

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

THE MS HERSHEY FOUNDATION

					23-62427	34			
Part I Identification of Disregarded Entities (Comp	lete if the organizat	ion answe	red "Yes"	on Form 990, Pa	irt IV, line 33.)				
(a) Name, address, and EIN of disregarded entity	(b) Primary activity		(c) omicile (state ign country)	(d) Total income	(e) End-of-year assets		(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organi or more related tax-exempt organizations during to	zations (Complet the tax year.)	e if the or	ganızatıon	answered "Yes"	on Form 990, F	Part	IV, line 34 becaus	e ıt had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	Legal dom or foreign	cıle (state	(d) Exempt Code section	(e) Public charity stat (if section 501(c)(:	us 3))	(f) Direct controlling entity	Section 5 conti organ	j) 12(b)(13 Tolled Ization
(4) TUE MY TON HERRIEF CONTON A CONTON TRUET								Yes	No
(1) THE MILTON HERSHEY SCHOOL & SCHOOL TRUST									
PO BOX 445 HERSHEY, PA 17033 23-1353340	SCH00L	Р	4	501(C)(3)		2	NA		No
(2) THE WILLIAM E DEARDEN ALUMNI CAMPUS INC									
PO BOX 830	SVCS TO ALUM	P	<u>, </u>	501(c)(3)		7	NA		No
HERSHEY, PA 17033 20-2579678				(-)(-)					
(3) HERSHEY CEMETERY COMPANY									
PO BOX 445 HERSHEY, PA 17033	CEMETERY	P	Α	501(C)(13)			NA		No
23-1973529								<u> </u>	

Cat No 50135Y

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34
	because it had one or more related organizations treated as a partnership during the tax year.)

(e) Predominant income (related, unrelated, excluded from tax under sections 512-514) (f) Share of total income (related, unrelated, excluded from tax under sections 512-514) (g) Share of end-of-year assets (g) Share of end-of-year assets (g) Share of end-of-year assets (Form 1065) (i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (Form 1065) Yes No Yes No	(d) Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) (f) Share of total income (related, unrelated, excluded from tax under sections 512-514) (g) Share of end-of-year assets Disproprtionate allocations? Schedule K-1 (Form 1065) General or managing partner?	(k) Percentage ownership				
Predominant income (related, unrelated, excluded from tax under sections 512-514) (r) Share of total income (Share of end-of-year assets (G) Share of end-of-year assets Dispropritionate allocations? Schedule K-1 (Form 1065) (Form 1065)	(d) Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) (e) (f) Share of total income (share of end-of-year assets (g) Share of end-of-year assets Dispropritionate allocations? Schedule K-1 (Form 1065) (Form 1065)	ral or iging	No			
Predominant income (related, unrelated, excluded from tax under sections 512-514) (f) Share of total income Share of end-of-year assets (g) Share of end-of-year assets Unsproprionate allocations? Schedule K-1 (Form 1065)	(d) Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) (T) Share of total income (T) Share of total income (Share of end-of-year assets) Share of end-of-year assets (Form 1065)	Genera manag	Yes			
Predominant income (related, unrelated, excluded from tax under sections 512-514) (related, unrelated, excluded from tax under sections 512-514) (related, unrelated, excluded from tax under sections 512-514) (re) Share of total share of end-of-year assets Disproprionate allocations?	(d) Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) (e) Predominant income (related, unrelated, excluded from tax under sections 512-514) (f) Share of total income share assets Obsproprionate allocations? Disproprionate allocations?	Code V—UBI amount in box 20 of Schedule K-1				
Predominant income (related, unrelated, excluded from tax under sections 512-514) (r) Share of total income share of end-of-year assets (r) Share of end-of-year assets	(d) Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) (f) Share of total income share of end-of-year assets Disproprial allocation	tionate	No			
Predominant income (related, unrelated, excluded from tax under sections 512-	Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512- Predominant income (share of total income year assets	Disproprt	Yes			
Predominant income (related, unrelated, excluded from tax under sections 512-	Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-	Share of end-of- year				
Predominant income (related, unrelated, excluded from tax under sections 512-	Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-	Share of total				
	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-				
(c) Legal domicile (state or foreign country)		Primary activity				
(b) Legal Primary activity domicile (state or	Primary activity	(a) Name, address, and EIN of related organization				

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) HERSHEY TRUST COMPANY PO BOX 445 HERSHEY, PA 17033 23-0692150	STATE TRUST C	PA	na	C CORP			
(2) HERSHEY ENTERTAINMENT RESORTS CO 27 WEST CHOCOLATE AVENUE HERSHEY, PA 17033 23-0691815	ENTERTAINMENT	PA	na	C CORP			
(3) THE HERSHEY COMPANY 100 CRYSTAL A DRIVE HERSHEY, PA 17033 23-0691590	CONFECTIONERY	PA	na	C CORP			
						Schodulo D (F	orm 990) 2011

(6)

Pa	rt V	Transactions With Related Organizations (Complete if the organization answered "Yes	s" on Form 990, Par	t IV, line 34, 35, 3	5A, or 36.)		
	Note.	Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
1 D	urıng t	e tax year, did the orgranization engage in any of the following transactions with one or more related orgar	nizations listed in Parts	s II-IV?			
а	Rece	ot of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1 a		No
b	Gıft, ç	rant, or capital contribution to related organization(s)			11:		No
C	Gıft, g	ant, or capital contribution from related organization(s)			10	Yes	
d	Loans	or loan guarantees to or for related organization(s)			10		No
e	Loans	or loan guarantees by related organization(s)			16	:	No
f	Sale	fassets to related organization(s)			1f	Yes	
g	Purch	ase of assets from related organization(s)			1 g		No
h	Exch	nge of assets with related organization(s)			11	١	No
i	Lease	of facilities, equipment, or other assets to related organization(s)			<u> 1</u> i		No
j	Lease	of facilities, equipment, or other assets from related organization(s)			<u> 1</u> j		+
k	Perfo	mance of services or membership or fundraising solicitations for related organization(s)			11		No
I	Perfor	nance of services or membership or fundraising solicitations by related organization(s)			11	Yes	
m	m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)						
n	Sharı	g of paid employees with related organization(s)			1r	Yes	<u> </u>
0	Reım	ursement paid to related organization(s) for expenses			10		No
р	Reim	ursement paid by related organization(s) for expenses			1 <u>r</u>	Yes	ــــــ
q	O the	transfer of cash or property to related organization(s)			19		No
r	Other	transfer of cash or property from related organization(s)			1r	Yes	\bot
2	Ifthe	inswer to any of the above is "Yes," see the instructions for information on who must complete this line, in	icluding covered relati	onships and transact	ion thresholds		
		(a)	(b) Transaction	(c)	(d) Method of determ	ınına am	ount
		Name of other organization	type(a-r)	Amount involved	involve		
(1) (2)							
(2)							
(3)							
(-)							
(4)							
. ,							
(5)							

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

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 entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate alloc		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
· · · · · · · / · · - /	SUPPLEMENTAL INFORMATION	No disclosures are required for Schedule R, Part V, Line 2 because the M S Hershey Foundation does not control any other organization
WITH RELATED ORGANIZATIONS		

Schedule R (Form 990) 2011

Additional Data

Software ID: Software Version:

EIN: 23-6242734

Name: THE MS HERSHEY FOUNDATION

Form 990, Special Condition Description:

Special Condition Description