FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPE | ROVAL |
|---|----------------------|-----------|
| | OMB Number: | 3235-0287 |
| l | Estimated average bu | urden |

0.5

hours per response:

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* RIELLY JOHN P | | | | | | 2. Issuer Name and Ticker or Trading Symbol HESS CORP [HES] | | | | | | | | | Check | all app | licable) | 10% | Person(s) to Issuer 10% Owner Other (specify | |
|--|---|--|--|---------|------------------|---|------------------|---------|---|--------|-----------------|---|---------------|---|---|------------------------------------|---|---|--|--|
| (Last) (First) (Middle) HESS CORPORATION | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/07/2016 | | | | | | | | | X | belov | v) `` | belo esident and | w) i | |
| 1185 AVENUE OF THE AMERICAS | | | | | | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) NEW YORK NY 10036 | | | | , | | | | | | | | | | Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (5 | tate) (| Zip) | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Noi | n-Deriv | ative | Se | curitie | s Ac | quired | , Dis | posed o | f, or | r Ben | efici | ally (| Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Da | | n Date, | 3. Transaction Code (Instr. 8) | | | | | | 4 and Se | | ount of ities icially d Following ted | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | | Transaction(s) (Instr. 3 and 4) | | | (man. 4) | |
| Common Stock, \$1.00 par value 03/07/2 | | | | | | 2016 | | | S ⁽¹⁾ | | 5,707 | 7 D \$4 | | \$49 | .28 | 3 187,652 ⁽²⁾ | | D | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | Date, | ate, Transaction | | | | 6. Date I Expiration (Month/I | on Dat | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | | ivative urity | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nui of | nber | | | | | | | | |

Explanation of Responses:

- 1. Shares sold solely to satisfy tax withholding on vesting of shares of restricted stock.
- 2. This amount includes 18,768 shares held in escrow pursuant to the Corporation's 2008 Long-Term Incentive Plan. The reporting person has only voting power of these shares until lapsing of the period set by the Committee administering the Plan at which time the shares plus accrued dividends will be delivered to the reporting person if he is still an employee of the Corporation.

Remarks:

George C. Barry for John P.
Rielly
03/08/2016

** Signature of Reporting Person Date

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

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.