**HESS CORP** Form 4 March 06, 2014

# FORM 4

### **OMB APPROVAL**

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Table I. Non-Doningtine Committee Assuring Disposed of an Doneficially On

January 31, Expires: 2005 Estimated average

0.5

**SECURITIES** 

burden hours per response...

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

<ol> <li>Name and Address of Reporting HOLIDAY EDITH E</li> </ol>	Person *	2. Issuer Name <b>and</b> Ticker or Trading Symbol HESS CORP [HES]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last) (First) (	(Middle)	3. Date of Earliest Transaction	(Check an applicable)		
HESS CORPORATION, 1185 AVENUE OF THE AMERICAS		(Month/Day/Year) 03/04/2014	X Director 10% Owner other (give title below) Other (specification)		
(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
NEW VODY NV 10026		Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting		

#### NEW YORK, NY 10036

(State)

(Zip)

(City)

(5)	()	Table	e I - Non-De	erivative S	securi	ties Ac	quirea, Disposea	of, or Beneficia	lly Owned
1.Title of Security	2. Transaction Date (Month/Day/Year)		3. Transactio	4. Securi		or	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect
(Instr. 3)	(1.1011111/2/11)	any	Code	Disposed	of (D	))	Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and	5)	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)
					(A) or		Reported Transaction(s)		
_			Code V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock,	03/04/2014		A	2,178	A	\$0	35,780	D	
\$1.00 par value									

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

#### Edgar Filing: HESS CORP - Form 4

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	ınt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative		•		Securities	3		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(2.11541
					4, and 5)						
					i, and 3)						
									Amount		
						Data	Evaluation		or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
HOLIDAY EDITH E							
HESS CORPORATION	v						

HESS CORPORATION 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036

## **Signatures**

George C. Barry for Edith E. 03/06/2014 Holiday

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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