FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| Check this box if no longer subject |
|-------------------------------------|
| to Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(h) |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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

| Name and Address of Reporting Person* Schoonman Geurt G | | | | | 2. Issuer Name and Ticker or Trading Symbol HESS CORP [HES] | | | | | | | | | (Chec | k all app Direc | ationship of Reporting all applicable) Director | | rson(s) to Is 10% O Other (s | wner |
|---|--|--|---------------|---|---|---|---|--------------------------------|-----------------|---|--------------------|-----------------------------|--|---|---|---|---------------------------------------|------------------------------------|------------|
| (Last) (First) (Middle) 1185 AVENUE OF THE AMERICAS | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/12/2020 | | | | | | | | X | belov | Officer (give title below) Senior Vic | | below) | specify |
| (Street) NEW YO | | | 10036 Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi Line) X | · | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | Exec if an | Deemed cution Date, ny nth/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securities Acqui Disposed Of (D) (In | | | | | Securit Benefic Owned | . Amount of Securities Beneficially Dwned Following Reported | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | PI PI | rice | Transa | ction(s) 3 and 4) | | | (111501.4) |
| Common Stock, \$1.00 par value 08 | | | 08/12/2 | 2020 | | | | S ⁽¹⁾ | | 4,686 | D | \$ | 54.08 | .08 37,906 ⁽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) | ative Conversion Date Execution Date, if any | | | 4. Transaction Code (Instr. 8) | | of Deriv | r osed) r. 3, 4 | 6. Date Expirati (Month/ | ion Da | Year) Securities Underlying Derivative Security (Ins 3 and 4) | | De Sei (In: | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4) | Ownershi Form: Direct (D) or Indirect (I) (Instr. 4 | Ownership Form: | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amou or Numb of Share | er | | | | | |

Explanation of Responses:

- 1. Shares sold in connection with a transaction relating to the reporting person's ex-spouse pursuant to a domestic relations order.
- 2. This amount includes 17,906 shares held in escrow pursuant to the Corporation's Long Term Incentive Plans. The reporting person has only voting power of these shares until lapsing of the period set by the Committee administering the Plans 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:

Barry Schachter for Guert

G.Schoonman

08/14/2020

** Signature of Reporting Person

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.