П

## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject t | റ |
|---------------------------------------|---|
| Section 16. Form 4 or Form 5          | 0 |
| obligations may continue. See         |   |
| Instruction 1(b).                     |   |

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

# OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

| OND NUMBER.            | 3233-0201 |
|------------------------|-----------|
| Estimated average burd | en        |
| hours per response:    | 0.5       |
|                        |           |

| 1. Name and Address of Reporting Person*<br>HOLIDAY EDITH E |         |          | 2. Issuer Name <b>and</b> Ticker or Trading Symbol<br>HESS CORP [HES] | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable) |                                   |                       |  |  |  |
|---|---------|----------|---|--|-----------------------------------|-----------------------|--|--|--|
| HOLIDAY EDITH E   |         |          |   | X  | Director                          | 10% Owner             |  |  |  |
|   |         | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year)<br>02/04/2009        |  | Officer (give title<br>below)     | Other (specify below) |  |  |  |
| 1185 AVENUE OF THE AMERICAS                                 |         | CAS      | 4. If Amendment, Date of Original Filed (Month/Day/Year)              | Individual or Joint/Group Filing (Check Applicable                         |                                   |                       |  |  |  |
| (Ctroot)  |         |          |   | Line)  | 1 0                               |                       |  |  |  |
| (Street)  | NY      | 10036    |   |  | Form filed by One Repo            | rting Person          |  |  |  |
|   |         | 10036    |   |  | Form filed by More than<br>Person | One Reporting         |  |  |  |
| (City)  | (State) | (Zip)    |   |  |                                   |                       |  |  |  |

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | Transaction<br>Code (Instr. |   |        |               |               | Securities                         | (D) or Indirect | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|---------------------------------|--|---|-----------------------------|---|--------|---------------|---------------|------------------------------------|-----------------|---|
|                                 |  |   | Code                        | v | Amount | (A) or<br>(D) | Price         | Transaction(s)<br>(Instr. 3 and 4) |                 | (11511:4)   |
| Common Stock, \$1.00 par value  | 02/04/2009                                 |   | <b>A</b> <sup>(1)</sup>     |   | 2,642  | Α             | <b>\$0.00</b> | 24,086                             | D               |   |

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

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transa<br>Code (<br>8) |   | 5. Nu<br>of<br>Deriv<br>Secu<br>Acqu<br>(A) or<br>Dispo<br>of (D)<br>(Instr<br>and 5 | ative<br>rities<br>ired<br>osed | 6. Date Exerc<br>Expiration Da<br>(Month/Day/Y | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr. 3<br>and 4) |       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|---|---|--|---|------------------------------|---|--|---------------------------------|--|---|-------|---|--|--|--|--|
|   |   |  |   | Code                         | v | (A)  | (D)                             | Date<br>Exercisable                            | Expiration<br>Date  | Title | Amount<br>or<br>Number<br>of<br>Shares              |  |  |  |  |

Explanation of Responses:

1. Granted pursuant to Rule 16b-3(d).

Remarks:

#### <u>George C. Barry for Edith E.</u> <u>Holiday</u>

02/05/2009

\*\* 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.