FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

/ashington,	D.C.	20549	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-02								
Estimated average burden								
hours per response:	0.5							

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

1. Name and Slentz A  (Last)  1185 AVE	3. Da	2. Issuer Name and Ticker or Trading Symbol HESS CORP [ HES ]  3. Date of Earliest Transaction (Month/Day/Year) 02/01/2022								(Che	Relationship of Reporting Person(s) to Issue heck all applicable) Director 10% Own X Officer (give title below) Senior Vice President				ner				
(Street) NEW YOL (City)	RK NY	te) (Z	0036 Zip)	n-Deriv											ndividual or Joint/Group Filing (Check Applicable )  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
''' ''' '			2. Transa Date (Month/I		2A. Deemed Execution D if any (Month/Day/		on Date,	Transaction Disposed Code (Instr.		ties Acquired (A) o 1 Of (D) (Instr. 3, 4 a			5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of ndirect Beneficial Dwnership Instr. 4)		
Common Stock, \$1.00 par value					L/2022	/2022		M	ľ	(D)		(D) A	\$0.00	+	r. 3 and 4)		D		
*					3/2022				<b>S</b> <sup>(2)</sup>		23,771 D		\$91.4	40,520 <sup>(3)</sup>			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	n Date,	Date, Transacti Code (Ins				6. Date I Expirati (Month/I	on Da			s Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	1	Amount or Number of Shares					
2019 Performance Share Unit	\$0.00	02/01/2022			M			10,512	(4)		(4)	\$1.0	nmon ock, 00 par alue	18,396	\$0.00	0		D	

## **Explanation of Responses:**

- 1. Represents shares of Hess Corporation common stock earned upon vesting of Performance Share Units granted on March 6, 2019, based on the relative performance of total shareholder return of Hess common stock compared with that of its peers over the three-year performance period ending December 31, 2021.
- 2. Includes 5,675 shares sold solely to satisfy tax withholding on vesting of shares of Hess Corporation common stock earned from Performance Share Units.
- 3. This amount includes 8,527 shares are 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.
- 4. Each Performance Share Unit entitles the holder to a payout of shares of Hess common stock equal to between 0% and 200% of such Performance Share Unit depending on the relative performance of the total shareholder return of Hess common stock compared with that of its peers over a three year performance period ending December 31, 2021, as more particularly described in the applicable award agreement.

## Remarks:

Barry Schachter for Andrew P. Slentz

02/03/2022

\*\* 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.