Edgar Filing: HESS CORP - Form 4

HESS COR	Р										
Form 4											
April 09, 20											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							т	IB APPROVAL			
	UNITED	STATES SE	Washington			INGE (OMB Number:	3235-0287		
Check the	his box		vv asnington	, D.C. 20	J J 47			Expires:	January 31,		
if no lor		MENT OF CI	HANGES IN	IGES IN BENEFICIAL OWNERSHIP OF					2005		
subject section	10			SECURITIES					Estimated average burden hours per response 0.{		
Form 4											
Form 5	Filed put	rsuant to Secti	on 16(a) of th	ne Securi	ties I	Exchang	ge Act of 1934,				
obligation may cor		(a) of the Publ	ic Utility Hol	ding Co	mpan	y Act of	f 1935 or Sectio	n			
See Inst		30(h) of th	ne Investment	t Compa	ny Ao	ct of 194	40				
1(b).											
(Duint on Tours	D										
(Print or Type	Responses)										
1. Name and	Address of Reporting	Person [*] 2	Issuer Name and	d Ticker o	r Trad	ino	5. Relationship o	f Reporting Pe	rson(s) to		
HESS JOH	ibol	a realize and meker of mading				Issuer					
		•	SS CORP [H	ES]							
(Last)	(First) (Middle) 3. D	3. Date of Earliest Transaction (Check					ck all applicabl	all applicable)		
(Eust)	(1150)	. ,	onth/Day/Year)	Tansaction			_X_ Director	X 10	% Owner		
HESS COF	RPORATION, 11		05/2007				X Officer (giv	e title Otl	her (specify		
AVENUE	OF THE AMERI	CAS					below) Chairman	below) of the Board a	nd CEO		
	(Street)	4 I f	Amendment, D	ate Origin	al		6 Individual or I	oint/Groun Fili	ing(Check		
			d(Month/Day/Yea	-				6. Individual or Joint/Group Filing(Check Applicable Line)			
							X Form filed by One Reporting Person				
NEW YOR	RK, NY 10036						Form filed by I Person	More than One R	leporting		
(City)	(State)	(Zip)		.	G	•.•		a D a .			
	、	-					quired, Disposed o		-		
1.Title of Security	2. Transaction Date (Month/Day/Year)						5. Amount of Securities	6. Ownership	7. Nature of Indirect		
(Instr. 3)	(Wolitil/Day/Tear)	any	Code	(Instr. 3,	-		Beneficially	Form: Direct			
· /		(Month/Day/Y					Owned	(D) or	Ownership		
							Following	Indirect (I)	(Instr. 4)		
					(A)		Reported Transaction(s)	(Instr. 4)			
			Code V	Amount	or	Drice	(Instr. 3 and 4)				
Common			Code V	Amount	(D)	Price			Charitable		
Stock,			- (1)			\$		_	Lead		
\$1.00 par	04/05/2007		S <u>(1)</u>	100	D	5 6.51	11,288,179	Ι	Annuity		
value									Trust (2)		

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

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 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. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Tit Amou Under Secur (Instr	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
HESS JOHN B HESS CORPORATION 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036	Х	X	Chairman of the Board and CEO				
Signatures							
George C. Barry for John B. Hess	04/09/200	7					

Date

**Signature of Reporting Person

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).
- (1) The sales of shares set forth herein are made in connection with a selling plan by the charitable lead annuity trust referred to below dated August 1, 2006, as amended February 5, 2007, that is intended to comply with Rule 10b5-1(c).
- (2) Held by a previously reported charitable lead annuity trust established under the will of Leon Hess. The reporting person is one of five trustees of the trust.

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.