## FORM 4

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

Washington,	D.C. 20549	

STATEMENT	OF	CHANGES	IN BE	NEFICIAL	<b>OWNERSHIP</b>

l	OMB APPRO	VAL
l	OMB Number:	3235-0287
l	Estimated average burden	
l	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 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     DeSanctis Ellen						2. Issuer Name and Ticker or Trading Symbol CONOCOPHILLIPS [ COP ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title below) below)					
(Last) (First) (Middle) 16930 PARK ROW DR.						3. Date of Earliest Transaction (Month/Day/Year) 02/13/2021								Senior Vice President					
(Street) HOUSTON TX 77084				_	4. If Amendment, Date of Original Filed (Month/Day/Year)							6	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(City)	(\$	State)	(Zip)																
			Table I			_				ired,	Disposed			<del>,</del>		T	I		
1. Title of Security (Instr. 3)			2. Trans Date (Month/l		r) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Tran	esaction(s) tr. 3 and 4)				
Common	Stock			02/13	3/2021				M		6,126.9744	A	(1)	28	3,704.9744	D			
Common	Stock			02/13	3/2021				D		4,770.9744	D	\$46.585		23,934	D	D		
Common	Stock			02/13	3/2021				F		1,356	D	\$46.585		22,578	D	D		
Common	Stock														579.972 <sup>(2)</sup>	I By ConocoPhillips Savings Plan			
	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. Deen Executio if any (Month/D	n Date,	4. Transa Code ( 8)		Deri Secu Acq Disp	umber of vative urities uired (A) o oosed of (E tr. 3, 4 and	Exp (Mo			7. Title and Amour Securities Underly Derivative Security (Instr. 3 and 4)		ing Derivative		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	e ercisabl	Expiration Date	Title	Amount Number Shares			(Instr. 4)			
Stock Units	(3)	02/13/2021			М			6,126.974	14	(4)	(5)	Common Stock	6,126.9	9744	\$0.00	0	D		

## **Explanation of Responses:**

- 1. Each stock unit was the economic equivalent of one share of common stock and settled in cash.
- 2. Includes units acquired through routine dividend transactions that are exempt under rule 16a-11 and through a qualified plan that are exempt under rule 16b-3.
- 3. The stock units represent ConocoPhillips common stock on a 1-for-1 basis.
- 4. The stock units grant settles 3 years from date of grant, subject to earlier or partial settlement upon termination of employment after attainment of age 55 with five years of service, layoff, death or disability, or a change
- 5. The stock units do not have an expiration date

## Remarks:

Shannon B. Kinney (by Power of Attorney filed with the 02/17/2021 Commission on February 15,

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.