FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

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

| Washington, [ | D.C. | 20549 |
|---------------|------|-------|
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| STATEMENT | OF CHANGE | S IN BENEFIC | CIAL OW | /NERSHIP |
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OMB APPROVAL 3235-0287 OMB Number: 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*     Olds Nicholas G            |                          |   |                         |   | 2. Issuer Name and Ticker or Trading Symbol CONOCOPHILLIPS [ COP ] |                                   |                                     |                         |                      |  |   |  |  | Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner |   |  |   |  |  |
|--|--------------------------|---|-------------------------|---|--|-----------------------------------|-------------------------------------|-------------------------|----------------------|--|---|--|--|---|---|--|---|--|--|
| (Last) (First) (Middle) 16930 PARK ROW DR.                           |                          |   |                         | 3. Date of Earliest Transaction (Month/Day/Year) 11/04/2021 |  |                                   |                                     |                         |                      |  |   | X Officer (give title Other (specify below)  Executive Vice President  |  |   |   |  |   |  |  |
| (Street) HOUST(  |                          | tate)   | 77084<br>(Zip)          | _   | 4. If Amendment, Date of Original Filed (Month/Day/Year)           |                                   |                                     |                         |                      |  | Lir   | 6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |  |   |   |  |   |  |  |
| 1. Title of Security (Instr. 3)                                      |                          | 2. Transactio<br>Date<br>(Month/Day/V                       | n 2<br>Fear) ii         | 2A. Deemed<br>Execution Date,                               |  | 3.<br>Transaction<br>Code (Instr. |                                     |                         |                      |  | r<br>and 5)                                   | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following  |  | 6. Ownershi<br>Form: Direc<br>(D) or Indire<br>(I) (Instr. 4)                               | t Indirect                              | Indirect Beneficial t Ownership (Instr.                            |   |  |  |
|  |                          |   |                         |   |  | Code                              | e V                                 | Amount (A) or (D) Price |                      | 1  | Reported<br>Fransaction(s)<br>Instr. 3 and 4) |  |  |   |   |  |   |  |  |
| Common   | ommon Stock 11/04/20     |   | 11/04/202               | 21  |  |                                   | M                                   |                         | ç                    | 9,200  |   | \$58.  | 0775                                   | 9,200   |   | D  |   |  |  |
| Common   | Stock                    |   | 11/04/202               | 21  |  |                                   | S                                   |                         | 9                    | 9,200  | D   | \$74   | 4.64                                   | 0   |   | D  |   |  |  |
| Common Stock   |                          |   |                         |   |  |                                   |                                     |                         |                      |  |   |  | 1,162.328(1)                           |   | I                                       | By<br>ConocoPhillips<br>Savings Plan                               |   |  |  |
|  |                          | Т   | able II - Deriv         |   |  |                                   |                                     |                         |                      | posed o  |   |  |  | y Owned   |   |  |   |  |  |
| Derivative Conversion Date Execurity or Exercise (Month/Day/Year) if |                          | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | ecution Date, Transacti |   |  |                                   | Expiration Date<br>(Month/Day/Year) |                         | An<br>Se<br>Un<br>De | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |   | Derivative Security (Instr. 5)   |  | Number of rivative curities neficially rived llowing ported insaction(s) str. 4)            | Ownership of<br>Form: E<br>Direct (D) C | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |  |  |
|  |                          |   |                         | Code  | · V  | (A)                               |                                     | Date<br>Exercisa        | ıble                 | Expiratio<br>Date  | n Tit   | :le  | Amount<br>or<br>Number<br>of<br>Shares | 1 1   |   |  |   |  |  |
| Stock<br>Options<br>(Right to  | \$58.0775 <sup>(2)</sup> | 11/04/2021  |                         | M   |  | 9,200                             |                                     | (2)                     |                      | 02/05/202  |   | ommon<br>Stock   | 9,200                                  | \$0.00  |   | 9,200  | D |  |  |

## **Explanation of Responses:**

- 1. Includes units acquired through routine dividend transactions that are exempt under rule 16a-11 and through a qualified plan that is exempt under rule 16b-3.
- 2. The stock options were exercisable on 02/05/2016.

## Remarks:

Whitney A. Cox (by Power of Attorney filed with the Commission on August 4,

11/05/2021

\*\* 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.