FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| ashington, D.C. 20549 | |
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| STATEMENT | OF | CHANGES | IN I | BENEFICIA | L O | WNERS | HIP |
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| OMB APPROVAL | | | | | | | | | | | |
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| OMB Number: 3235-02 | | | | | | | | | | | |
| 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

| 1. Name and Address of Reporting Person* Murti Arjun N | | | | | 2. Issuer Name and Ticker or Trading Symbol CONOCOPHILLIPS [COP] | | | | | | | | | | ationship o k all applio Directo | cable) | g Pers | son(s) to Issi 10% Ow | |
|---|--|--|-------------------|----------------------------|--|---|-------|--|-------------------------------------|---|--|-------------------|--|---|---|------------|--|--|-----------|
| (Last) | (Fi | rst) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 01/15/2024 | | | | | | | | | Officer below) | (give title | | Other (s below) | pecify | |
| 16930 PARK ROW DR. | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | ON T | v , | 77084 | | | | | | | | | | | X | | • | | orting Persor | |
| | JIV 12 | | 77004 | | | | | | | | | | | | Persor | 1 | | | |
| (City) | (S | tate) | (Zip) | | Rule 10b5-1(c) Transaction Indication | | | | | | | 1 | | | | | | | |
| Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In | | | | | | | | | | | | on or written | plan ti | hat is intende | d to | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| | | | Date | nte E onth/Day/Year) ii | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (I | Transaction Dispose Code (Instr. 5) | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 an | | | 5. Amou Securitie Benefici Owned F Reported | ies Form ially (D) (Following (I) (I | | r Indirect Estr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | Amount (A) or (D) | | 9 | Transaction(s) (Instr. 3 and 4) | | | | Instr. 4) |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any | | 3A. Deemed Execution D if any (Month/Day/ | Date, Transaction | | | n of I | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | ve derivative Securities | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | xpiration ate | Title | Amour or Number of Shares | r | | | | | |
| Stock Units | (1) | 01/15/2024 | | | A | | 1,961 | | (2) | T | (2) | Common Stock | 1,96 | . \$ | 112.2075 | 51,279.277 | 72 ⁽³⁾ | D | |

Explanation of Responses:

- 1. The stock units convert to ConocoPhillips common stock on a 1-for-1 basis.
- 2. The reporting person has elected to receive payment as a lump sum six months following separation from service, which election may be changed by the reporting person to provide for an alternative schedule of deferred payments.
- 3. Includes units acquired through routine dividend transactions that are exempt under rule 16a-11.

Whitney A. Cox, Attorney in Fact (by Power of Attorney filed with the Commission on

01/17/2024

January 18, 2023)

** 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.