SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287
Estimated average bu	rden
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)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* DELK CHRISTOPHER P.					2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>CONOCOPHILLIPS</u> [ COP ]									5. 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) 02/14/2023									X Officer (give title Other (specify below) below) Vice President, Controller					
(Street) HOUSTON TX 77084 (City) (State) (Zip)					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	ole I - Nor	n-Deriva	ative	e Se	curities	s Ac	quired,	Dis	posed o	of, oi	r Bene	eficial	y Owned	ł				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr. 5)						Benefici	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	int (A) or (D)		Price	Transac	Transaction(s) (Instr. 3 and 4)			(1150. 4)	
			Table II -								osed of, converti	·			Owned		-			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Date Execution	Date, T	ransaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s illy g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershij (Instr. 4)	
					ode	v	(A)	(D)	Date Exercisat		Expiration Date	Title		Amount or Number of Shares						

## Explanation of Responses:

(1)

(1)

1. The stock units represent ConocoPhillips common stock on a 1-for-1 basis.

02/14/2023

02/14/2023

2. The stock units grant settles 3 years from date of grant, but may be eligible for full or partial settlement upon termination of employment after attainment of age 55 with five years of service, layoff, death or disability, or a change in control

(2)

(3)

3. The stock units will be forfeited if the reporting person separates from service prior to the end of an escrow period ending on the earliest to occur of the following: (a) termination of employment as a result of Is a lock in the called of the call of the reporting person may also elect to defer all or part of the settlement value of the units to a later date.

## **Remarks:**

Stock

Units

Stock

Units

Whitney A. Cox, Attorney in Fact (by Power of Attorney filed with the Commission on November 7, 2022) \*\* Signature of Reporting Person

3,268

13,297

\$0.00

\$0.00

Title Commo

Stock

Common

Stock

02/14/2026

(3)

02/16/2023

3,268

13.297

D

D

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).

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Α

3,268

13.29

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.