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GATES ST	EPHEN F									
Form 4	20. 2005									
December								OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								N OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. STATEMENT OF STATEMENT OF Statement of Statement to S Section 17(a) of the P				NGES IN SECUI	Estimated burden hou response	Estimated average burden hours per response 0.5				
1(b).	truction	00(11)			. compu	-)				
(Print or Type	e Responses)									
1. Name and Address of Reporting Person <u>*</u> GATES STEPHEN F			2. Issuer Name and Ticker or Trading Symbol CONOCOPHILLIPS [COP]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) ((Middle) 3. Date of Earliest Transaction					(encer un applicable)			
600 NORTH DAIRY ASHFORD			(Month/Day/Year) 12/16/2005				Director 10% Owner X Officer (give title Other (specify below) below) Senior Vice President			
(Street)			4. If Amendment, Date 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 			
HOUSTO	N, TX 77079						Person	where than one it	epotting	
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, 4)	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: R	eport on a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned directly (or indirectly			
Achimuci, K	eport on a separate find				Perso inform requir	ns who res nation cont red to resp ays a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onof	Expiration Date	Underlying Securities	Derivati
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Security

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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					(Instr. 5	
			Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock	<u>(1)</u>	12/16/2005	А	5.15		(2)	(2)	Common Stock	5.15	\$ 57.

Reporting Owners

Reporting Owner Name / Address]	Relationships	
	Director	10% Owner	Officer	Other
GATES STEPHEN F 600 NORTH DAIRY ASHFORD HOUSTON, TX 77079			Senior Vice President	
<u></u>				

Signatures

E. Julia Lambeth, Attorney-in-Fact (Power of Attorney filed with the Commission on 02/10/2004) 12/20/2005

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).

**Signature of Reporting Person

(1) The shares of phantom stock convert to ConocoPhillips common stock on a 1-for-1 basis.

The shares of phantom stock were acquired under a Defined Contribution Makeup Plan providing for settlement upon termination of

(2) employment, subject to possible deferred payment in certain circumstances. The reporting of this transaction is not an acknowledgment that it is not an exempt transaction under an Excess Benefit Plan pursuant to Rule 16b-3(c).

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.

Date