FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
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

1. Name and Address of Reporting Person*  WARNER CYNTHIA J			2. Issuer Name and Ticker or Trading Symbol CHEVRON CORP [ CVX ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
				[ ]								_	Oirector	or	10% Owner		ner			
(Last)	(F	irst) (	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/24/2024									Officer (give title below)			Other (specify below)			
5001 EXECUTIVE PARKWAY SUITE 200			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					
(Street)	MON C	A	94583													Form to Person		e thar	n One Repo	rting
				Ri	Rule 10b5-1(c) Transaction Indication															
(City) (State) (Zip)						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to														
						satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Date,			´   Co	Transaction Disposed Of (D) (Instr. 3 Code (Instr. 5)					es Form ally (D) of Following (I) (Ir		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
										ode V	,	Amount	(A) (D)	or	Price	Reported Transact (Instr. 3	ction(s)			Instr. 4)
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. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. B)		of		Expira	6. Date Exercisable ai Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Exp	oiration	Title	or Nu of	nount imber ares					
Phantom	(2)	05/24/2024		+	I			\ <u>-</u> ,		1)		(1)	Common	╁	24	\$157.75	185 <sup>(3)</sup>	$\dashv$	D	
Stock <sup>(1)</sup>	(2)	03/24/2024			1		24		Ι '	,		(.)	Stock	1	24	φ137.73	185(3)		D	I

## **Explanation of Responses:**

- 1. The shares of phantom stock issued under the Chevron Non-Employee Directors' Equity Compensation and Deferral Plan become payable in common stock upon the reporting person's termination of service
- 2. 1-for-1
- 3. This number includes dividend equivalent accruals (2) under the Chevron Non-Employee Directors' Equity Compensation and Deferral Plan.

/s/ Rose Z. Pierson, Attorneyin-Fact for Cynthia J. Warner

05/28/2024

\*\* 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.