

Yarrington Patricia E  
 Form 4  
 September 03, 2009

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 Washington, D.C. 20549**

OMB APPROVAL

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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 OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 Yarrington Patricia E

2. Issuer Name and Ticker or Trading Symbol  
 CHEVRON CORP [CVX]

5. Relationship of Reporting Person(s) to Issuer  
 (Check all applicable)

(Last) (First) (Middle)  
 6001 BOLLINGER CANYON ROAD  
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)  
 06/04/2009

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
 VP & Chief Financial Officer

SAN RAMON, CA 94583  
 (City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership Indirect Beneficial Ownership (Instr. 4)		
				(A) or (D)	Code	V	Amount	(D)	Price

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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 Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction Code	5. Number of Derivative	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative 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 <sup>(1)</sup>	\$ 0 <sup>(2)</sup>	06/04/2009	I		172		<u>(1)</u>	<u>(1)</u>	Common Stock	172	\$ 69.9
Phantom Stock <sup>(1)</sup>	\$ 0 <sup>(2)</sup>	06/19/2009	I		176		<u>(1)</u>	<u>(1)</u>	Common Stock	176	\$ 68.0
Phantom Stock <sup>(1)</sup>	\$ 0 <sup>(2)</sup>	07/07/2009	I		191		<u>(1)</u>	<u>(1)</u>	Common Stock	191	\$ 62.7
Phantom Stock <sup>(1)</sup>	\$ 0 <sup>(2)</sup>	07/21/2009	I		181		<u>(1)</u>	<u>(1)</u>	Common Stock	181	\$ 66.2
Phantom Stock <sup>(1)</sup>	\$ 0 <sup>(2)</sup>	08/06/2009	I		173		<u>(1)</u>	<u>(1)</u>	Common Stock	173	\$ 69.2
Phantom Stock <sup>(1)</sup>	\$ 0 <sup>(2)</sup>	08/20/2009	I		175		<u>(1)</u>	<u>(1)</u>	Common Stock	175	\$ 68.5

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Yarrington Patricia E 6001 BOLLINGER CANYON ROAD SAN RAMON, CA 94583			VP & Chief Financial Officer	

## Signatures

Christopher A. Butner on behalf of Patricia E. Yarrington	09/03/2009
**Signature of Reporting Person	Date

## 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).

(1) The shares of phantom stock issued under the Chevron Deferred Compensation Plan for Management Employees II become payable in common stock upon the reporting person's termination of service.

(2) 1-for-1

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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