

# Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-0123

► See separate instructions.

## Part I Reporting Issuer

|                                                                                                                               |                                                                 |                                                                                             |                      |
|-------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|---------------------------------------------------------------------------------------------|----------------------|
| 1 Issuer's name<br><b>Occidental Petroleum Corporation</b>                                                                    |                                                                 | 2 Issuer's employer identification number (EIN)<br><b>95-4035997</b>                        |                      |
| 3 Name of contact for additional information<br><b>Investor Relations</b>                                                     | 4 Telephone No. of contact<br><b>(713) 552-8811</b>             | 5 Email address of contact<br><b>investors@oxy.com</b>                                      |                      |
| 6 Number and street (or P.O. box if mail is not delivered to street address) of contact<br><b>5 Greenway Plaza, Suite 110</b> |                                                                 | 7 City, town, or post office, state, and ZIP code of contact<br><b>Houston, Texas 77046</b> |                      |
| 8 Date of action<br><b>August 8, 2019</b>                                                                                     | 9 Classification and description<br><b>Common Stock; Merger</b> |                                                                                             |                      |
| 10 CUSIP number<br><b>Oxy 674599105<br/>APC 032511107</b>                                                                     | 11 Serial number(s)                                             | 12 Ticker symbol<br><b>OXY / APC</b>                                                        | 13 Account number(s) |

## Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.

14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ► **Please see attached.**

15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis ► **Please see attached.**

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ► **Please see attached.**

**Part II** **Organizational Action** (continued)

**17** List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ► [Please see attached.](#)

**18** Can any resulting loss be recognized? ► [Please see attached.](#)

**19** Provide any other information necessary to implement the adjustment, such as the reportable tax year ► [Please see attached.](#)

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature ► /s/ Vincent A. Alspach

Date ► 08/19/19

Print your name ► Vincent A. Alspach

Title ► Vice President, Tax

|                                       |                            |                      |      |                                                 |      |
|---------------------------------------|----------------------------|----------------------|------|-------------------------------------------------|------|
| <b>Paid<br/>Preparer<br/>Use Only</b> | Print/Type preparer's name | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN |
|                                       | Firm's name ►              | Firm's EIN ►         |      |                                                 |      |
|                                       | Firm's address ►           | Phone no.            |      |                                                 |      |

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054