FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
|-------------|------|-------|--|
| | | | |

| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See | STATEMENT OF CH |
|---|----------------------|
| Instruction 1(b). | Filed pursuant to Se |

ANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Petno Douglas B | | | | | 2. Issuer Name and Ticker or Trading Symbol JPMORGAN CHASE & CO [JPM] | | | | | | | | | Check | all app | , | ng Pe | erson(s) to Is 10% O Other (| wner |
|--|---|--|---------------|---|--|------------------|--|--------|-------------------------------------|---------------|------------------------|---|---|-------------------------|--|---|--|--|------|
| (Last) (First) (Middle) 383 MADISON AVENUE | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/15/2021 | | | | | | | | X | below) | | below) ercial Banking | | уреспу | | |
| (Street) NEW Y | vet) W YORK NY 10179-0001 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | . Indivine) | ′ | | | | | |
| (City) | (St | ate) (2 | Zip) | | | | | | | | | | | | | | | | |
| | | Table | I - N | lon-Deriva | tive | Secui | rities | Ac | quire | ed, Di | sposed o | f, or E | Benefic | ially | Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye | | | ear) if | Execution Date, | | e, | 3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (I | | | | nd 5) Secur Benef | | ities Folicially (D | | wnership m: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | | Transa | action(s) . 3 and 4) | | | (111501.4) | | |
| Common Stock 04/15/20 | | 04/15/202 | :1 | | | S ⁽¹⁾ | | 11,512 | D | \$150.8 | 998 | 373,531 | | | D | | | | |
| | | Tal | ole I | I - Derivati (e.g., pu | | | | | | | posed of, converti | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Exed if an | Deemed cution Date, y nth/Day/Year) | 4. Transa Code 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration Date (Month/Day/Year) | | Deriv Secu 3 and | int of rities rlying ative rity (Instr. | 8. Price of Derivative Security (Instr. 5) | | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. Sale pursuant to 10b5-1 Plan dated February 7, 2021.

/s/ David K.F. Gillis under **POA**

04/15/2021

** Signature of Reporting Person 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).

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.