FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average b	ourden								
- 1	houre per reenonce.	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

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1. Name and Address of Reporting Person* Richard Mark (Last) (First) (Middle) 3000 N. SAM HOUSTON PKWY E.						2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [HAL]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
					3. Date of Earliest Transaction (Month/Day/Year) 02/27/2024								X	Presid	bel sident - Western Hemis			ohere		
(Street) HOUSTON TX 77032					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication 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.														
		Tab	le I - No	n-Deriv	ative	Sec	curitie	es A	cquired	, Di	sposed (of, or B	enefici	ially (Owned	d				
1. Title of Security (Instr. 3)			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (I	Transaction Disposed Code (Instr.		ties Acquired (A) o I Of (D) (Instr. 3, 4 a		and 5) Securit Benefic		es ially Following d	Form (D) o	vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			02/27/	/2024	+			Code	v	Amount	(A) (D)	FIIC	rice Transa		tion(s) and 4) 576.552					
Common	Stock			,		2024 A 218,800 ⁽¹⁾ A \$ tive Securities Acquired, Disposed of, or Benefic								J		0/0.332		D		
			able II -	e.g., p)	tive S outs, c	ecu	urities s, war	rant	quired, I s, optio	Disp ns,	oosed of converti	, or Bei ible sec	neficia :urities	lly Ov s)	wned					
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	on Date,	4. Transaction Code (Instr. 8)		n of E		6. Date Exercisable Expiration Date (Month/Day/Year)		е	7. Title and Ai of Securities Underlying Derivative Sei (Instr. 3 and 4		Der	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisat		Expiration Date	Title	Amour or Number of Shares	er						
Option to Buy Common Stock (12/2018)	\$27.14								12/20/201	18	12/20/2028	Common Stock	43,92	4		43,924	ļ	D		
Option to Buy Common Stock (01/2018)	\$49.61								01/02/203	18	01/02/2028	Common Stock	24,01	9		24,019)	D		
Option to Buy Common Stock	\$55.68								01/03/201	17	01/03/2027	Common Stock	17,11	9		17,119)	D		
Option to Buy Common Stock	\$34.48								01/04/20	16	01/04/2026	Common Stock	28,60	4		28,604	1	D		
Option to Buy Common Stock	\$39.49								01/02/201	15	01/02/2025	Common Stock	14,80	7		14,807	7	D		

Explanation of Responses:

1. Shares of common stock issued to the reporting person on February 27, 2024, upon achievement of the performance criteria and vesting of performance share units granted on January 4, 2021, pursuant to the Halliburton Company Performance Unit Program.

/s/ Sarah I. Rubenfeld, by Power of Attorney

02/29/2024

** 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.