FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington.	DC	20540
wasiiiiuluii.	D.C.	20349

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average bur	den							
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

					0, 0	COLIO	11 00(11	1) 01 1110	iiivesamei	11 00	inpuny / to	101 10-10									
Name and Address of Reporting Person* Jones Myrtle L																5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 3000 NORTH SAM HOUSTON PARKWAY E.						3. Date of Earliest Transaction (Month/Day/Year) 07/24/2023										Officer (give title below) Senior Vice		Other (below) es - Tax	pecify		
(Street) HOUSTON TX 77032					4. If	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 Form filed by More than One Reporting Person					
(City) (State) (Zip)					1_	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															
												made pursu 10b5-1(c).				tion or writte	n plan	that is inten	ded to		
		Tabl	e I - No	on-Deriv	ative	Sec	uriti	es Ac	quired,	Dis	posed	of, or Be	enefic	ially	Owne	d					
Date		2. Transac Date (Month/Da		Execution		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				Securiti Benefic Owned	. Amount of ecurities eneficially wned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code	v	Amount	(A) or (D) Pri			Reported Transaction(s) (Instr. 3 and 4)							
Common Stock 07/24/2				2023				S		10,000	0 D	\$38.	305	57,12	26.225 ⁽¹⁾		D				
		Ta	able II									i, or Ben ible sec			wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, Day/Year)	Code (I		ction Number E		6. Date Exercisab Expiration Date (Month/Day/Year)		:	7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		De Se (In	Price of rivative curity str. 5)	vative derivative urity Securities	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisabl		expiration Date	Title	Amoun or Numbe of Shares	r							
Option to Buy Common Stock	\$39.96								03/04/201	3 0	3/04/2023	Common Stock	6,500			0 ⁽²⁾		D			
Option to Buy Common Stock	\$43.38								12/06/201	7 1	2/06/2027	Common Stock	5,800			5,800		5,800 D			
Option to Buy Common Stock	\$53.54								12/07/201	6 1	2/07/2026	Common Stock	5,100			5,100		D			
Option to Buy Common Stock	\$38.95								12/02/201	5 1	2/02/2025	Common Stock	8,400			8,400		D			
Option to Buy Common Stock	\$40.75								12/03/201	4 1	2/03/2024	Common Stock	8,400			8,400		D			
Option to Buy Common	\$50.62								12/04/201	3 1	2/04/2023	Common Stock	5,700			5,700		D			

Explanation of Responses:

- 1. Includes 208.508 shares of stock purchased through the Halliburton Company Employee Stock Purchase Plan for the period ending March 31, 2023 and 66.659 shares purchased for the period ending June 30, 2023.
- 2. Stock option expired March 4, 2023.

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

07/26/2023

** 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.