FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Vashington,	DC	20549	
vasilliquon,	D.U.	20040	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
houre per reenonee	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person* Geer Charles Jr. (Last) (First) (Middle) 3000 N. SAM HOUSTON PARKWAY E. (Street) HOUSTON TX 77032 (City) (State) (Zip)					3. D 05/	2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [HAL] 3. Date of Earliest Transaction (Month/Day/Year) 05/20/2024 4. If Amendment, Date of Original Filed (Month/Day/Year) Rule 10b5-1(c) Transaction Indication									S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) SVP & Chief Accounting Officer 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Check this box to indicate that a transaction was made pursuant to a contract, instruction satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										ction or writter	n plan	that is intend	ed to						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execu ay/Year) if any		a. Deemed secution Date, any lonth/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 a		nd Securit Benefic Owned	es ially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) (D)	or Pric	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
Common Stock 05			05/20)/2024	/2024		S ⁽¹⁾		3,000	0 D		97,08	3 97,083.822 ⁽²⁾		D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		Fransaction of I Code (Instr. Derivative (Expiration Date (Month/Day/Year) Amo Secution Und Deri			7. Title a Amount Securitie Underlyi Derivativ (Instr. 3	of s ng e Securit	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amour or Number of Shares	r					
Option to Buy Common Stock	\$31.44								12/05/201	8 1	2/05/2028	Commor Stock	8,700		8,700		D		
Option to Buy Common Stock	\$43.38								12/06/201	7 1	2/06/2027	Commor Stock	5,800		5,800		D		
Option to Buy Common Stock	\$53.54								12/07/201	6 1	2/07/2026	Commor Stock	5,100		5,100		D		
Option to Buy Common Stock	\$38.95								12/02/201	5 1	2/02/2025	Common Stock	8,700		8,700		D		
Option to Buy Common Stock	\$40.75								12/03/201	4 1	2/03/2024	Common Stock	8,700		8,700		D		

Explanation of Responses:

- 1. The sale was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on February 7, 2024.
- 2. Includes 384 shares of stock purchased through the Halliburton Company Employee Stock Purchase Plan for the period ended March 31, 2024.

/s/ Sarah I. Rubenfeld, by 05/21/2024 Power of Attorney

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).