FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington,	D.C.	20549	
rasilligion,	D.C.	20040	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	OMB APPROVAL									
OMB Number:	3235-0287									
Estimated average	burden									
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

									_				_	_				_			
Name and Address of Reporting Person* Banks Margaret Katherine						2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [HAL]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Daliks Malgaret Katherine						. ,										X Director			10% O	wner	
(Last) 3000 N.	,	irst) STON PARKWA	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/08/2021									Officer (give title Other (specify below)							
		4 1	4. If Amandment, Data of Original Filed (Manth/Day/Man)									6	6. Individual or Joint/Group Filing (Check Applicable								
(Street)	reet) OUSTON TX 77032				4.11	4. If Amendment, Date of Original Filed (Month/Day/Year)										Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(Si	tate)	(Zip)			Person									Tone repo						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Trans Date					action 2A. Deem Execution (ay/Year) if any		Deemed ution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,			Benefici Owned	es ially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
										Code	v	Amount		(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock																17	7,856		D		
		T	((e.g., p	uts,		s, warr	ants	s, c	option	s, c	onverti	ble	secu		y Owned	1				
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/Day	Date,		Fransaction of Ex Code (Instr. Derivative (M			Ex	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Set (Instr. 3 and 4				8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)		ate xercisablo		xpiration ate	Title		Amount or Number of Shares						
12/2021 Restricted Stock Units	(1)	12/08/2021			A		7,849			(2)		(2)		nmon ock	7,849	\$0	7,849		D		
08/2019 Restricted Stock Units	(1)									(3)		(3)		nmon ock	4,014		4,014	,	D		
02/2019 Restricted Stock	(1)									(3)		(3)		nmon ock	1,524		1,524	,	D		

Explanation of Responses:

- 1. Each restricted stock unit represents a right to receive one share of the Company's common stock.
- 2. The restricted stock units vest in one year on the first anniversary of the award. Shares will be delivered to the reporting person either upon vesting, or if reporting person elected to defer receipt, following cessation as a director.
- 3. The restricted stock units vest in four equal annual installments beginning with the first anniversary of the award. Shares will be delivered to the reporting person either upon vesting or, if reporting person elected to defer receipt, following cessation as a director.

/s/ Bruce A. Metzinger, by Power of Attorney

12/10/2021

** 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.