FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations may continue. See

Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

A/	D 0	20540
Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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

1. Name and Address of Reporting Person* <u>Arriaga Brent Alexander</u>					2. Issuer Name and Ticker or Trading Symbol HELIX ENERGY SOLUTIONS GROUP INC [HLX]									neck	all applic Directo	able)	Person(s) to Iss		wner
(Last) 3505 W.	,	rst) STON PARKW	(Middle) AY N.		3. Date of Earliest Transaction (Month/Day/Year) 01/01/2024									X	below)		orate	below) Controlle	·
SUITE 400					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	ON T	X.	77043											X		•		orting Persor	- 1
(City)	(S	tate)	(Zip)		Rule 10b5-1(c) Transaction Indication														
					Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Institute 10b5-1(c).														
		Tab	le I - Non-	-Derivat	ive	Secu	urities	Ac	quired, C	isp	osed o	f, or Be	neficia	lly (Owned				
Date				2. Transact Date (Month/Day	Execution			Date,	3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Instr. 5)			d	5. Amour Securitie Beneficia Owned F	s illy ollowing	Form (D) or	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	/	Amount	nount (A) or (D)			Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security 1. Title of Conversion or Exercise (Instr. 3) 2. Conversion Date (Month/Day/Year) 3. Transaction Date Execution Date, if any (Month/Day/Year)			Cod	Transaction of Deriv Secu Acqu (A) o Dispo of (D		of Derivati Securiti Acquire (A) or Dispose of (D) (Ir	of Ex Derivative (M Securities Acquired		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Cod	e V	, ((A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares						
Restricted Stock Units	(1)	01/01/2024		A		1	12,160		(1)		(2)	Common Stock	12,160		\$0.00	12,160)	D	

Explanation of Responses:

1. This Restricted Stock Unit ("2024 RSU") award was granted pursuant to the Company's 2005 Long Term Incentive Plan (as Amended and Restated effective May 15, 2019, the "LTIP") and each 2024 RSU represents the contingent right to receive one share of Company common stock. Forfeiture restrictions will lapse with respect to the 2024 RSUs granted on the basis of one-third of the grant on January 1, 2025, an additional one-third of the grant on January 1, 2026 and the remaining one-third of the grant on January 1, 2027. Upon each 2024 RSU vesting, the Compensation Committee of the Company's Board of Directors has the option to pay the value in cash at its discretion.

2. Upon lapse of the forfeiture restrictions of the 2024 RSUs.

Remarks:

Ken Neikirk by power of attorney

01/03/2024

** 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.