FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

KILIEO	IND EXCHAINGE COMMISSI
\	D 0 00540

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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(c). Se	ee Instruction 1	0.																		
Name and Address of Reporting Person* Little Thomas Mitchell						2. Issuer Name and Ticker or Trading Symbol HELIX ENERGY SOLUTIONS GROUP								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Little Thomas Mittchell						INC [HLX]									Direct		10% Ov	ner		
(Last) (First) (Middle)						<u></u> []								_	Officer (give title below)			Other (s below)	pecify	
3505 WEST SAM HOUSTON PKWY NORTH						3. Date of Earliest Transaction (Month/Day/Year)														
SUITE 4		IOODIOIVIEW	1 1101	TTTT	12/11/2024															
SUITE 4	00				4 If /	4. If Amendment, Date of Original Filed (Month/Day/Year)								6 1	6. Individual or Joint/Group Filing (Check Applicable					
(Street)					" " /	4. II Amendment, Date of Original Filed (Month/Day/Year)									Line)					
HOUST	ON TX	7	7043												Form filed by One Reporting Person					
		,	7015												Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)																	
		Table	I - Nor	n-Deriva	tive	Secu	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficia	lly Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)					Execution			ution Date, Tra		4. Securities Acquir action Disposed Of (D) (Instr. 5)				d Securit	5. Amount of Securities Beneficially Owned Following		ect (7. Nature of Indirect Beneficial Ownership		
						(-	(A) or			- Report		(I) (Instr.		(Instr. 4)				
								Code	V	Amount	(A) (D)	, 01	Price		3 and 4)					
Common Stock 12/11/2					/2024				Α		14,881	A \$		\$0 (1	106,190		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
				(e.g., pı	ıts, ca	alls, v	warra	ants,	optior	ıs, c	onvertib	le se	curi	ties)						
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)	4. Transaction Code (Instr. 8)		of		6. Date Exercisa Expiration Date (Month/Day/Yea		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forr Dire or In (I) (I	ership n: ct (D) direct nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		(A)		Date Exercis	able	Expiration Date Title Amo		ber							

Explanation of Responses:

1. This restricted stock award was granted pursuant to the Company's 2005 Long Term Incentive Plan (as Amended and Restated effective May 15, 2024) and therefore has no purchase or sales price.

/s/ Ken Neikirk by power of attorney

12/12/2024

** 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.