### FORM 4

☐ 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 that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *  |            |                                |         |               | 2. Issuer Name and Ticker or Trading Symbol |  |          |  |   |               |                 |                       |   |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |  |              |  |
|--|------------|--------------------------------|---------|---------------|---|--|----------|--|---|---------------|-----------------|-----------------------|---|---|---|--|--|--------------|--|
| Hair Cara M  | I.         | Helmerich & Payne, Inc. [ HP ] |         |               |   |  |          |  |   |               |                 | ,                     | 100   |   |   |  |  |              |  |
| (Last)   | (First)    | (First) (Middle)               |         |               |   | 3. Date of Earliest Transaction (MM/DD/YYYY) |          |  |   |               |                 |                       |   | DirectorX Officer (gi   | Director10% Owner  X_ Officer (give title below)Other (specify below)   |  |  |              |  |
| 1437 S. BOULDER AVE.   |            |                                |         |               | 12/6/2023                                   |  |          |  |   |               |                 |                       | SVP, CORP.  | SVP, CORP. SERVICES & CLO   |   |  |  |              |  |
|  | (Stre      | et)                            |         |               | 4. I  | f Am   | nendme   | nt, Date O   | rigin                                   | al File       | d (MM/I         | DD/YY                 | YY)   | 6. Individual o   | or Joint/G  | roup Filing  | (Check Appl  | icable Line) |  |
| TULSA, OK 74119  |            |                                |         |               |   |  |          |  |   |               |                 |                       |   | X _ Form filed by One Reporting Person Form filed by More than One Reporting Person |   |  |  |              |  |
| (C   | City) (Sta | te) (Zij                       | p)      |               |   |  |          |  |   |               |                 |                       |   | Form filed by   | More than (   | one Reporting P  | erson  |              |  |
|  |            |                                | Table   | I - Non-      | Deri  | ivati  | ve Secu  | ırities Acq  | quire                                   | ed, Dis       | posed           | of, or                | Be  | eneficially Owne  | d   |  |  |              |  |
| 1. Title of Security (Instr. 3) 2. Trans. I  |            |                                |         |               | Deemed<br>ution<br>, if any                 | 3. Trans. Co<br>(Instr. 8)                   | de       | 4. Securities Acqu<br>or Disposed of (D<br>(Instr. 3, 4 and 5) |   |               |                 | Direct (D) Ownershi   |   |   | of Indirect<br>Beneficial<br>Ownership                                  |  |  |              |  |
|  |            |                                |         |               |   |  |          | Code   | V                                       | Amou          | nt (A)          |                       | rice  |   |   |  | or Indirect<br>(I) (Instr.<br>4)                                   | (Instr. 4)   |  |
| Common Stock   |            |                                |         | 12/6/202      | 23  |  |          | A  |   | 21,92         | 1 A             |                       | \$0   |   |   | 151,658  | D  |              |  |
|  | Tab        | le II - Der                    | ivative | Securit       | ties I                                      | Bene   | ficially | Owned (a   | e.g.,                                   | puts,         | calls, w        | arrar                 | ıts,  | options, conver   | tible secu  | ırities)   |  |              |  |
| 1. Title of Derivate Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Trans. Date Execution Date, if any (Instr. 4) |            |                                | on (Ins | rans. (tr. 8) | Code  | Derivativ<br>Acquired<br>Disposed            |          |  | 6. Date Exercisable and Expiration Date |               |                 | ritie<br>vati<br>r. 3 | and Amount of<br>es Underlying<br>ve Security<br>and 4) | Underlying Security Security (Instr. 5)   |   | Ownership<br>Form of<br>Derivative<br>Security:<br>Direct (D)<br>or Indirect | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |              |  |
|  |            |                                |         | C             | ode   | V  | (A)      | (D)  | Date<br>Exer                            | e<br>rcisable | Expiration Date | Title                 | Sl  | mount or Number of<br>nares   |   | Transaction(s)<br>(Instr. 4)   | (I) (Instr.<br>4)  |              |  |

### **Explanation of Responses:**

Reporting Owners

| Reporting Owners               |               |           |                           |       |  |  |  |  |  |
|--------------------------------|---------------|-----------|---------------------------|-------|--|--|--|--|--|
| Panarting Owner Name / Address | Relationships |           |                           |       |  |  |  |  |  |
| Reporting Owner Name / Address | Director      | 10% Owner | Officer                   | Other |  |  |  |  |  |
| Hair Cara M.                   |               |           |                           |       |  |  |  |  |  |
| 1437 S. BOULDER AVE.           |               |           | SVP, CORP. SERVICES & CLO |       |  |  |  |  |  |
| TULSA, OK 74119                |               |           |                           |       |  |  |  |  |  |

#### **Signatures**

/s/ William H. Gault by Power of Attorney for Cara M. Hair

\*\*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 control

