Edgar Filing: HALLIBURTON CO - Form 4

ILALI IDIDTON CO

HALLIBUR Form 4											
March 12, 20 FORM	4 UNITED									OMB APPROVAL OMB 3235-0287 Number:	
if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	er STATEN 6. Filed pur inue. Section 17(suant to Se a) of the Pu	OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES • Section 16(a) of the Securities Exchange Act of 1934, • Public Utility Holding Company Act of 1935 or Section •) of the Investment Company Act of 1940					Expires: January 31, 2005 Estimated average burden hours per response 0.5			
(Print or Type R	Responses)										
			2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [HAL]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. Date of (Month/D 1900 ST. JAMES PLACE, SUITE 03/10/20 700 (Street) 4. If Ame			3. Date of Earliest Transaction (Month/Day/Year) 03/10/2014					Director 10% Owner X Officer (give title Other (specify below) below) Senior Vice Pres - Tax			
			endment, Date Original onth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
HOUSTON,	TX 77056							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	sposed 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	03/10/2014			D	274 <u>(1)</u>	D	\$ 56.47	9,047.85 <u>(2)</u>	D		

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

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 number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Da (Month/Day/Y e			Securities	8. Pr Deri [,] Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to Buy Common Stock	\$ 50.62					12/04/2013	12/04/2023	Common Stock	5,700	
Option to Buy Common Stock	\$ 39.96					03/04/2013	03/04/2023	Common Stock	6,500	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Jones Myrtle L 1900 ST. JAMES PLACE SUITE 700 HOUSTON, TX 77056			Senior Vice Pres - Tax				
Signatures							
Robert L. Hayter, by Power of Attorney		03/12/2	2014				

**Signature of Reporting Person

Date

Explanation of Responses:

* 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).

Shares transferred to Halliburton Company for payment for Federal tax withholding obligations on lapse of restrictions on shares issued (1) under the Stock and Incentive Plan. Said Plan permits Reporting Person to satisfy withholding tax obligation by transferring unrestricted

- shares to the Issuer.
- (2) Includes 421.85 shares of stock purchased through the Halliburton Company Employee Stock Purchase Plan through December 31, 2013.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.