#### HALLIBURTON CO

Form 4

December 09, 2015

### FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** 

**OMB APPROVAL** 

3235-0287 Number: January 31,

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

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

Geer Charles Jr.			Symbol	Issuer	Issuer		
			HALLIBURTON CO [HAL]	(0	(Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(carries of frames)			
			(Month/Day/Year)	Director	10% Owner		
3000 N. SAM HOUSTON PARKWAY E., PLAZA 2-6211			12/07/2015	X Officer (	(give title Other (specif		
			12/0//2013	below)	below)		
				VP ar	nd Corporate Controller		

2. Issuer Name and Ticker or Trading

(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting Person

6. Individual or Joint/Group Filing(Check

5. Relationship of Reporting Person(s) to

HOUSTON, TX 77032

(City)	(State)	(Zip) Tabl	e I - Non-D	Derivative Securities A	equired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired on (A) or Disposed of (D (Instr. 3, 4 and 5)		Securities Form: Direct Indirect Beneficially (D) or Beneficia Owned Indirect (I) Ownershi	Indirect Beneficial Ownership
			Code V	(A) or Amount (D) Price	Reported Transaction(s) (Instr. 3 and 4)		
Common Stock	12/07/2015		D	$258 \frac{(1)}{2} D \frac{\$}{38.0}$	15,692.02 (2)	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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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8. Pr Deri Secu (Inst

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. Transacti Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to Buy Common Stock	\$ 38.95					12/02/2015	12/02/2025	Common Stock	8,700
Option to Buy Common Stock	\$ 40.75					12/03/2014	12/03/2024	Common Stock	8,700

## **Reporting Owners**

Reporting Owner Name / Address	Keiauonsinps				
	Director	10% Owner	Officer	Other	

VP and Corporate Controller

Geer Charles Jr.

3000 N. SAM HOUSTON PARKWAY E.

PLAZA 2-6211

HOUSTON, TX 77032

## **Signatures**

Robert L. Hayter, by Power of Attorney 12/09/2015

\*\*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 601.890 shares of stock purchased through the Halliburton Company Employee Stock Purchase Plan for the period ended March 31, 2015, June 30, 2015 and September 30, 2015.

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.

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