FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

|--|

OMB Number: 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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or S	Section	on 30(h) of the	e Investme	nt Cor	npany Ac	t of 194	.0								
1. Name and Address of Reporting Person* Rainey Joe D							2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [HAL]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle) 14TH FLOOR CITIBANK BUILDING						3. Date of Earliest Transaction (Month/Day/Year) 12/09/2016									X Officer (give title Offier (specify below) Pres., Eastern Hemisphere						
AL QUT	A'EYAT RO	OAD								. = "			`			1 : ./0		(0) 1.4			
(Street) DUBAI C0 000			00000	0000			4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (C Line) X Form filed by One Reporti											orting Perso	on		
(City) (State) (Zip)						Person															
		Tab	le I - No	n-Deriv	/ative	Se	curiti	es A	cquired,	Dis	posed	of, or	Ben	eficially	y Owne	d					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ur) E	2A. Deer Execution f any Month/I	on Date	Code	Transaction Disp Code (Instr. 5)		ecurities Acquired (A) losed Of (D) (Instr. 3, 4			5. Amou Securiti Benefic Owned Reporte	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				(11150.1.4)		
Common	Stock			12/09	9/2016	2016		F		3,449	9 ⁽¹⁾ D \$		\$53.9	174,6	685.977		D				
		٦	able II -						quired, [s, optio						Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	ed 4 Date, 1	4. Transac Code (I 8)		n of Ex		Expiration	. Date Exercisable and xpiration Date Month/Day/Year)		7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		ecurity	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)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	OI N O	umber							
Option to Buy Common Stock	\$ 53.54								12/07/201	.6 1	2/07/2026	Comn		0,100		40,100)	D			
Option to Buy Common Stock	\$38.95								12/02/201	.5 1	2/02/2025	Comn		8,700		58,700)	D			
Option to Buy Common Stock	\$40.75								12/03/201	.4 1	2/03/2024	Comn Stoo		9,500		59,500)	D			
Option to Buy Common Stock	\$50.62								12/04/201	.3 1	2/04/2023	Comn		5,500		45,500)	D			
Option to Buy Common Stock	\$33.5								12/05/201	2 1	2/05/2022	Comm		7,933		37,933	3	D			
Option to Buy Common	\$35.57								12/06/201	.1 1	2/06/2021	Comn		4,566		14,566	5	D			

Explanation of Responses:

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

Remarks:

Robert L. Hayter, by Power of

12/12/2016

Attorney

** 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.