FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washing

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ton, D.C. 20549	OMB APPROVAL

ı	CIVID ALT INC	/ V/\L						
	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).

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

					or	Sect	ion 30(n) of th	e Investmen	t Cor	npany Act	of 1940							
1. Name and Address of Reporting Person* PROBERT TIMOTHY J					2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [HAL]									tionship all appli Directo	· ·				
(Last) (First) (Middle) 3000 N. SAM HOUSTON PKWY E							of Earli 2012	est Tra	nsaction (Mo	onth/	Day/Year)		X Officer (give title below) Other (s below) Pres- Strategy & Corp Develo					·	
(Street) HOUSTON TX 77032					4. 11	f Am	endme	nt, Date	e of Original	Filed	(Month/D	ay/Year)		6. Individual or Joint/Group Filing (Check Applical Line) X Form filed by One Reporting Person Form filed by More than One Reporting					n
(City) (State) (Zip)						Person													
		Tab	le I - No	n-Deri\	/ative	e Se	curit	ies A	cquired,	Dis	osed (of, or Be	nefic	ially	Owne	t			
1. Title of Security (Instr. 3) 2. Transa Date (Month/Date)					Execution		on Dat	Code (I	Transaction Disposed Code (Instr. 5)		ities Acquired (A) of d Of (D) (Instr. 3, 4			Securiti Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		n: Direct r Indirect sstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	V	Amount	(D)	PIIC		(Instr. 3	Transaction(s) (Instr. 3 and 4)			
Common	Stock			<u> </u>	5/2012				D		399(1) D \$		4.15	.15 169,850		50 D		
		T							quired, D s, option						wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemi Execution if any (Month/Da	Date,	4. Transaction Code (Instr 8)		5. Number of		6. Date Exercisable Expiration Date (Month/Day/Year)					De Se	erivative ecurity nstr. 5)	9. Number o derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		epiration ate	Title	Amour or Number of Shares	er					
Option to Buy Common Stock	\$35.57								12/06/2011	. 12	2/06/2021	Common Stock	43,70	00		43,700		D	
Option to Buy Common Stock	\$39.19								12/01/2010	12	2/01/2020	Common Stock	26,10	00		26,100		D	
Option to Buy Common Stock	\$29.35								12/01/2009	12	2/01/2019	Common Stock	45,60	00		45,600		D	
Option to Buy Common Stock	\$15.42								12/02/2008	12	2/02/2018	Common Stock	26,40	00		26,400		D	
Option to Buy Common Stock	\$35.67								02/13/2008	02	2/13/2018	Common Stock	8,40	0		8,400		D	
Option to Buy Common Stock	\$14.43								03/16/2004	03	3/16/2014	Common Stock	14,00	00		14,000		D	
Option to Buy Common Stock	\$22.55								04/07/2005	04	1/07/2015	Common Stock	10,92	20		10,920		D	
Option to Buy Common	\$33.02								01/06/2006	0.	/06/2016	Common Stock	11,00	00	_	11,000		D	

Explanation of Responses:

Remarks:

^{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.

** 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.